2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000006838

FILED Jul 11, 2012 Secretary of State

Entity Name: THE PINES OF MONTVERDE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 WEST SR 434 17608 WINDY PINE STREET **SUITE 5000** MONTEVERDE, FL 34756

LONGWOOD, FL 327795044

New Mailing Address: Current Mailing Address:

2180 WEST SR 434 P.O. BOX 560360

SUITE 5000 MONTVERDE, FL 34756

LONGWOOD, FL 327795044

FEI Number: 33-1147556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

> BROWN, LEROY L JR 17608 WINDY PINE STREET US MONTVERDE, FL 34756

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LEROY L BROWN, JR. 07/11/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

HIETT, DON Name: Address: P.O. BOX 560360 City-St-Zip: MONTVERDE, FL 34756

Title:

Name: BROWN, LEROY L JR. Address: P.O. BOX 560360 City-St-Zip: MONTVERDE, FL 34756

Title: TD

WASMAN, CHRIS Name: P.O. BOX 560360 Address: City-St-Zip: MONTVERDE, FL 34756

Title: SD

Name: PHILLIPS, LYNETTE P.O. BOX 560360 Address: City-St-Zip: MONTVERDE, FL 34756

Title:

BECKER, JENNIFER Name: P.O. BOX 560360 Address: MONTVERDE, FL 34756 City-St-Zip:

Title:

HAMM, MIKE Name: Address: P.O. BOX 560360 MONTVERDE, FL 34756 City-St-Zip:

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DON HIETT PD 07/11/2012