

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21581

FILED  
Jan 13, 2011  
Secretary of State

**Entity Name:** PINELAKE GARDENS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

6854 SE MORNINGSIDE DR  
STUART, FL 34997 US

**New Principal Place of Business:**

**Current Mailing Address:**

6854 SE MORNINGSIDE DR  
STUART, FL 34997 US

**New Mailing Address:**

FEI Number: 59-2823982

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HARRIS, OLIVER H  
10 CENTRAL PKWY  
SUITE 240  
STUART, FL 34994 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ELLIOTT, JOHN  
Address: 4476 SE BASSWOOD TERRACE  
City-St-Zip: STUART, FL 34997 US

Title: VP  
Name: BACON, EUGENE  
Address: 4492 SE SWEETWOOD WAY  
City-St-Zip: STUART, FL 34997 US

Title: S  
Name: TRUAX, DIANA  
Address: 7157 SE NORTHWOOD CT  
City-St-Zip: STUART, FL 34997 US

Title: T  
Name: LEWIS, JANE  
Address: 4750 SE BYWOOD TERRACE  
City-St-Zip: STUART, FL 34997 US

Title: D  
Name: KURBIEC, JAMES  
Address: 4486 SE BASSWOOD TERRACE  
City-St-Zip: STUART, FL 34997 US

Title: D  
Name: VICKERS, CECILE  
Address: 4678 SE COPPERWOOD TERRACE  
City-St-Zip: STUART, FL 34997 US

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: JANE LEWIS

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01/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date