

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25532

FILED
Apr 28, 2011
Secretary of State

Entity Name: BIG PINE ACRES MOBILE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3290 W. PARKVILLE
LOT #21
LECANTO, FL 344617914 US

New Principal Place of Business:

Current Mailing Address:

3290 W PARKVILLE ST
LOT #21
LECANTO, FL 344617914 US

New Mailing Address:

FEI Number: 59-2891437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, BRUCE
3290 W. PARKVILLE ST.
LOT #21
LECANTO, FL 344617914 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: TURNER, BRUCE
Address: 3290 W. PARKVILLE ST. LOT #21
City-St-Zip: LECANTO, FL 344617914

Title: S/T
Name: DUNN, DEANNA
Address: 3290 W. PARKVILLE ST., #15
City-St-Zip: LECANTO, FL 344617914

Title: D
Name: DUNN, RICHARD
Address: 3290 W PARKVILLE ST LOT #15
City-St-Zip: LECANTO, FL 344617914

Title: D
Name: PROCEK, MIKE
Address: 3290 W. PARKVILLE ST., LOT 25
City-St-Zip: LECANTO, FL 344617914

Title: D
Name: HOBBS, CARL
Address: 3290 W PARKVILLE ST, LOT 26
City-St-Zip: LECANTO, FL 344617914

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: BRUCE TURNER

P

04/28/2011

Electronic Signature of Signing Officer or Director

Date