

FILE NOW: FILING FEE AFTER MAY IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. McMath
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JUL 26 PM 4:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N94000005246 (3)**

1. Corporation Name
PINECREST HOMEOWNERS ASSOCIATION OF TALLAHASSEE, INC.

Principal Place of Business Mailing Address
2523 MAR COURT TALLAHASSEE FL 32301- 2523 MAR COURT- TALLAHASSEE FL 32301

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **10/21/1994** 3a. Date of Last Report
4. FEI Number Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 **2517 MAR CT** 26 **1801 BITTER ROOT TRAIL**
22 Suite, Apt #, etc. 27 Suite, Apt #, etc.
23 City & State **TALLA. FL** 28 City & State **TALLA FL**
24 Zip **32301** 25 Country 29 Zip **32312** 30 Country

9. Name and Address of Current Registered Agent
**RALEY, JOAN H
2523 MAR COURT
TALLAHASSEE FL 32301-**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable) **1801 BITTER ROOT TRAIL**
83
84 City **TALLA** FL 85 Zip Code **32312**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Joan H. Raley* 4/28/95

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT - Director
NAME	JOAN H. RALEY
STREET ADDRESS	1801 BITTER ROOT TRAIL
CITY, ST, ZIP	TALLA. FL 32312
TITLE	CINDY SKELTON - VICE PRES.
NAME	3405 MONITOR LANE
STREET ADDRESS	TALLA. FL 32312
CITY, ST, ZIP	
TITLE	SECRETARY Director
NAME	CANDICE CURENTON
STREET ADDRESS	2517 MAR CT
CITY, ST, ZIP	TALLA. FL 32301
TITLE	TREASURER Director
NAME	ROBT. COSSINS
STREET ADDRESS	2400 BRADBURY, TALLA. FL 32312
CITY, ST, ZIP	
TITLE	Director
NAME	ELIZABETH PYLE - Director
STREET ADDRESS	UNKNOWN
CITY, ST, ZIP	
TITLE	Director
NAME	Barry Brooks
STREET ADDRESS	120 Spawtswood Dr
CITY, ST, ZIP	TALLA. FL

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	800001547968
13 STREET ADDRESS	-07/27/95--01069--021
14 CITY, ST, ZIP	*****51.25 *****51.25
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	800001547968
33 STREET ADDRESS	-07/27/95--01069--022
34 CITY, ST, ZIP	*****68.75 *****68.75
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	Delete
54 CITY, ST, ZIP	
61 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	Delete
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(6)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my 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 on Block 12 or Block 13 of changed, or on an attachment with an address.

SIGNATURE: *Joan H. Raley* 4/28/95 (904) 599-1950