

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2004 8:00 am
Secretary of State

01-14-2004 90008 006 ****61.25

DOCUMENT # N98000000559	
1. Entity Name BLACKPINE FARMS HOMEOWNERS' ASSOCIATION, INC.	

Principal Place of Business 1708 21ST STREET VERO BEACH, FL 32960 US	Mailing Address 1708 21ST STREET VERO BEACH, FL 32960 US
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44001745



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01062004 Chg-NP CR2E037 (10/03)

4. FEI Number 65-0895026		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent
LUETHJE, DAVID E 1708 21ST STREET VERO BEACH, FL 32960		Name
		Street Address (P.O. Box Number is Not Acceptable)
		City
		FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD	TITLE	☒ Change ☐ Addition
NAME	HOOPER, FRANK P JR	NAME	
STREET ADDRESS	775 BLACKAVE DR	STREET ADDRESS	775 BLACKPINE DRIVE
CITY-ST-ZIP	VERO BEACH, FL 32968	CITY-ST-ZIP	
TITLE	D	TITLE	☒ Change ☐ Addition
NAME	KARMERIS, KENNETH J	NAME	
STREET ADDRESS	780 BLACKAVE DR	STREET ADDRESS	780 BLACKPINE DRIVE
CITY-ST-ZIP	VERO BEACH, FL 32962	CITY-ST-ZIP	
TITLE	D	TITLE	☒ Change ☐ Addition
NAME	OLDS, STEVE	NAME	
STREET ADDRESS	750 BLACK AVE DR	STREET ADDRESS	750 BLACKPINE DRIVE
CITY-ST-ZIP	VERO BEACH, FL 32961	CITY-ST-ZIP	
TITLE	D	TITLE	☒ Change ☐ Addition
NAME	LANGLEY, PHILIP	NAME	
STREET ADDRESS	750 BLACK AVE DR	STREET ADDRESS	705 BLACKPINE DRIVE
CITY-ST-ZIP	VERO BEACH, FL 32967	CITY-ST-ZIP	
TITLE	STD	TITLE	☒ Change ☐ Addition
NAME	LUETHJE, DAVID	NAME	
STREET ADDRESS	375 39TH CT	STREET ADDRESS	725 BLACKPINE DRIVE
CITY-ST-ZIP	VERO BEACH, FL 32968	CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-04

Date

(772) 562-4191

Daytime Phone #