2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000559

FILED Mar 21, 2008 Secretary of State

Entity Name: BLACKPINE FARMS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1708 21ST VERO BEA	STREET ACH, FL 32960	US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1708 21ST VERO BEA	STREET ACH, FL 32960	US			
FEI Number:	: 65-0895026	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:	
LUETHJE, 1708 21ST VERO BEA		US			
	named entity su e of Florida.	ubmits this statement for the po	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATUF					
		c Signature of Registered Age		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () [D. HOOPER TRU 775 BLACKPINE VERO BEACH, F	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ()[KARMERIS, KEN 780 BLACKPINE VERO BEACH, F	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () I OLDS, STEVE 750 BLACKAVE VERO BEACH, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ()[LANGLEY, PHILI 705 BLACKPINE VERO BEACH, F	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD () I LUETHJE, DAVIE 725 BLACKPINE VERO BEACH, F	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID E. LUETHJE SEC. 03/21/2008