

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90043 037 *****61.25

DOCUMENT # N05490

1. Entity Name

PINE HAVEN PLAZA CONDOMINIUM ASSOCIATION,
INC.



Principal Place of Business

10911 BONITA BCH. RD. S.E.
STE 1011
BONITA SPRINGS FL 34135
US

Mailing Address

10911 BONITA BCH. RD. S.E.
STE 1011
BONITA SPRINGS FL 34135
US

2. Principal Place of Business

10981 Bonita Beach Road
Suite, Apt. #, etc.

3. Mailing Address

10981 Bonita Beach Road
Suite, Apt. #, etc.

City & State

Bonita Springs FL
Zip 34135 Country US

City & State

Bonita Springs FL
Zip 34135 Country US

4. FEI Number

59-2508295

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HEDRICH, CLEDA
10911 BONITA BCH. RD. SE
BONITA SPRINGS FL 34135

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

10981 Bonita Beach Road

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

FILE NOW: 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

TITLE PD
NAME HEDRICH, NORMAN ☐ Delete
STREET ADDRESS 10911 BONITA BEACH RD SE STE 1011
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE VTD
NAME HEDRICH, CLEDA ☐ Delete
STREET ADDRESS 10911 BONITA BEACH RD SE STE 1011
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE D
NAME FRANZ, DONALD ☐ Delete
STREET ADDRESS 10915 BONITA BEACH RD STE 1091
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS ✓ 10981 BONITA BEACH RD.
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS ✓ 10981 BONITA BEACH RD.
CITY-ST-ZIP

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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

3/2/04 239-947-3432

Date

Daytime Phone #