

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90017 023 ****61.25

DOCUMENT # 723829

1. Entity Name
PINE WOODS, INC.

APR 01 2004



Principal Place of Business
**8420 S.W. 188TH TERR.
MIAMI, FL 33157**

Mailing Address
**8420 S.W. 188TH TERR.
MIAMI, FL 33157**



03312004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1428802	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**REED, STELLA K
8700 SW 190 ST
MIAMI, FL 33157**

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IN THIS SPACE**

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

Stella K. Reed

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

(NOTE: Registered Agent signature required when reinstating)

4/14/04
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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PETTO, JOHN
STREET ADDRESS	8420 SW 188 TERR
CITY-ST-ZIP	MIAMI, FL
TITLE	VD
NAME	GLIENKE, HERMAN
STREET ADDRESS	8420 SW 188 TERRACE
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	VURA, RICHARD
STREET ADDRESS	8420 SW 188 TERR.
CITY-ST-ZIP	MIAMI, FL
TITLE	VD
NAME	PETTO, JOHN
STREET ADDRESS	8420 SW 188 TERR
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	SCHUETTE, RONALD
STREET ADDRESS	8420 SW 188 TERRACE
CITY-ST-ZIP	MIAMI, FL
TITLE	D
NAME	ECKERT, OLGA
STREET ADDRESS	8420 SW 188 TERR
CITY-ST-ZIP	MIAMI, FL

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IN THIS SPACE**

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:

Stella K. Reed

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STELLA K. REED

4/14/04
Date

(305) 235-8269
Daytime Phone #