2004 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

04 APR 26 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000002890

1. Entity Name
PINE HOLLOW ESTATES HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
PO BOX 540903 LAKE WORTH, FL 33454 US	PO BOX 540903 LAKE WORTH, FL 33454 US

☒ CHECK HERE IF MAKING CHANGES

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

4. FEI Number **65-0783947** ☐ 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
D'AMBROSIO, COLLEEN 4244 PINE HOLLOW CIRCLE GREENACRES, FL 33463	Name: Rick Steinbauer Street Address (P.O. Box Number is Not Acceptable): 4148 Pine Hollow Cir. City: Greenacres FL Zip Code: 33463

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: Rick Steinbauer, President April 20, 2004
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 Initial or Amended UBR

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	TD D'AMBROSIO, COLLEEN 4244 PINE HOLLOW CIRCLE GREEN ACRES, FL 33463	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Mouring, Robert 4276 Pine Hollow Circle Green Acres, FL 33463	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MOURING, C. ANNELIES 4252 PINE HOLLOW CIR GREEN ACRES, FL 33463	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Mouring, Robert 4276 Pine Hollow Cir. Greenacres, FL 33463	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD DEFETRILLO, CAROL 4195 PINE HOLLOW CIRCLE GREENACRES, FL 33463	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	800034194568 04/27/04--01089--015 **61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STEINBAUER, RICK 4148 PINE HOLLOW CIRCLE LAKE WORTH, FL 33465	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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: _____ 4/20/04 561-963-6254
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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