

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719693

FILED  
May 01, 2006  
Secretary of State

Entity Name: PINE VIEW ASSOCIATION,INC.

## Current Principal Place of Business:

1 PYTHON PATH  
OSPREY, FL 34229 US

## New Principal Place of Business:

## Current Mailing Address:

1 PYTHON PATH  
OSPREY, FL 34229 US

## New Mailing Address:

FEI Number: 59-1390908      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

GREGORY, SUSAN  
8451 TURNBERRY CIRCLE  
SARASOTA, FL 34241 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: GREGORY, SUSAN  
Address: 8451 TURNBERRY CIRCLE  
City-St-Zip: SARASOTA, FL 34241

Title: VP ( ) Delete  
Name: FROUG, ROBIN  
Address: 4123 DRAKESWOOD CIRCLE  
City-St-Zip: SARASOTA, FL 34232

Title: TREA ( ) Delete  
Name: PATEL, VIDISHA  
Address: 3520 BAYOU LOUISE LANE  
City-St-Zip: SARASOTA, FL 34242

Title: RS (X) Delete  
Name: COTLER, DENISE  
Address: 4724 SWEETMEADOW CIRCLE  
City-St-Zip: SARASOTA, FL 34238

Title: CS (X) Delete  
Name: BERKOWITZ, DAVID  
Address: 1049 BAHIA VISTA COURT  
City-St-Zip: SARASOTA, FL 34232

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN GREGORY

PRES

05/01/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date