

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708864

FILED  
Feb 02, 2011  
Secretary of State

Entity Name: PINE CASTLE, INC.

**Current Principal Place of Business:**

4911 SPRING PARK ROAD  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

4911 SPRING PARK ROAD  
JACKSONVILLE, FL 32207

**New Mailing Address:**

FEI Number: 59-0704733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

MAY, JONATHAN W  
4911 SPRING PARK ROAD  
JACKSONVILLE, FL 32207 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: M  
Name: MAY, JONATHAN W  
Address: 4911 SPRING PARK ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: PD  
Name: SALLAS HERRING, SARAH  
Address: 11251 BROCKTON PLACE  
City-St-Zip: JACKSONVILLE, FL 32257

Title: SD  
Name: FINLEY, RENEE  
Address: 4537 CARRARA COURT  
City-St-Zip: JACKSONVILLE, FL 32224

Title: TD  
Name: HUDSON, JOHN  
Address: 752 EAGLE POINT DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: VD  
Name: ROWLAND, DAVID  
Address: 3551 SHADY WOODS STREET E.  
City-St-Zip: JACKSONVILLE, FL 32224

Title: D  
Name: OETJEN, JOHN  
Address: 6449 W. CHRISTOPHER CREEK ROAD  
City-St-Zip: JACKSONVILLE, FL 32217

I hereby 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 all other like empowered.

SIGNATURE: JONATHAN W. MAY

M

02/02/2011

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

\_\_\_\_\_  
Date