

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2003 8:00 am
Secretary of State

02-13-2003 90274 037 ***61.25

DOCUMENT # 761066

1. Entity Name
PINESHORE LAKEFRONT HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**12301 SW 113 AVENUE
MIAMI FL 33176
US**

Mailing Address

**12301 SW 113 AVENUE
MIAMI FL 33176
US**

2. Principal Place of Business

11453 SW 126 Terrace
Suite, Apt. #, etc.

3. Mailing Address

11453 SW 126 Terrace
Suite, Apt. #, etc.

City & State

Miami FL

City & State

Miami FL

4. FEI Number **NOT APPLICABLE**

Applied For
Not Applicable

Zip

33176

Country

USA

Zip

33176

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WYLDE, W KEITH
12301 SW 113 AVENUE
MIAMI FL 33176**

7. Name and Address of New Registered Agent

Name **Andrew Wagner**
Street Address (P.O. Box Number is Not Acceptable)
11453 SW 126 Terrace
City **Miami** State **FL** Zip Code **33176**

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: **Andrew K. Wagner** **ANDREW K. WAGNER**

1/30/03

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

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 **SD** ☒ Delete
NAME **SCHWARTE, LARRY**
STREET ADDRESS **12261 SW 113TH AVENUE**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **PD** ☐ Delete
NAME **WYLDE, W KEITH**
STREET ADDRESS **12301 SW 113TH AVENUE**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **VD** ☒ Delete
NAME **TALLEY, MACK**
STREET ADDRESS **11225 SW 128TH STREET**
CITY-ST-ZIP **MIAMI FL 33155**

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 **TD** ☐ Change ☒ Addition
NAME **BARBARA J GONZALEZ**
STREET ADDRESS **12703 SW 114 COURT**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **PD** ☐ Change ☒ Addition
NAME **ANDREW WAGNER**
STREET ADDRESS **11453 SW 126 TERRACE**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE **VD** ☒ Change ☐ Addition
NAME **KEITH WYLDE**
STREET ADDRESS **12301 SW 113 AVENUE**
CITY-ST-ZIP **MIAMI FL 33176**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 OF KEITH WYLDE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/03 305 251-3896

Date

Daytime Phone

CR2E037 (10/02)