2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000010342

Entity Name: PINES CROSSINGS ASSOCIATION, INC.

FILED Apr 28, 2018 **Secretary of State** CC1218069436

Current Principal Place of Business:

C/O INVESTMENT MANAGEMENT ASSOCIATES INC. 1575 SAN IGNACIO AVENUE - SUITE 400 CORAL GABLES, FL 33146

Current Mailing Address:

C/O INVESTMENT MANAGEMENT ASSOCIATES INC. 1575 SAN IGNACIO AVENUE - SUITE 400 CORAL GABLES, FL 33146 US

FEI Number: 47-3320090 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BALES, MATT 4000 PONCE DE LEON BLVD. SUITE 470 CORAL GABLES, FL 33146 US

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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

Name BAUMGARD, DANIEL Name SHEPPARD, RALPH

C/O INVESTMENT MANAGEMENT C/O INVESTMENT MANAGEMENT Address Address ASSOCIATES INC. ASSOCIATES INC.

1575 SAN IGNACIO AVENUE - SUITE 1575 SAN IGNACIO AVENUE - SUITE

City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146

Title **DIRECTOR** Title **DIRECTOR** Name FORD, JORDAN Name WHITE, LYNISE

Address C/O ALDI INC Address C/O WALGREEN CO. 1171 N. STATE ROAD 7

1901 E. VOORHEES ST.

City-State-Zip: ROYAL PALM BEACH FL 33411 City-State-Zip: DANVILLE IL 61834

Electronic Signature of Signing Officer/Director Detail

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.