

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14644

**FILED**  
**Apr 28, 2014**  
**Secretary of State**  
**CC6128708341**

**Entity Name:** PINE CREEK TOWNHOMES ASSOCIATION, INC.

**Current Principal Place of Business:**

8350 COMMERCE CENTER DRIVE  
PORT ST. LUCIE, FL 34986

**Current Mailing Address:**

8350 COMMERCE CENTER DRIVE  
PORT ST. LUCIE, FL 34986 US

**FEI Number:** 59-2694311

**Certificate of Status Desired:** Yes

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

LANG MANAGEMENT COMPANY  
21045 COMMERCIAL TRAIL  
BOCA RATON, FL 33486 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:** KEVIN M. CARROLL

04/28/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VPD  
Name CRISTIAN, BIVOLAN  
Address 7392 PINE CREEK WAY  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title PRESIDENT  
Name BERKICH, ED DR.  
Address 7350 PINE CREEK WAY  
City-State-Zip: PORT ST. LUCIE FL 34986

Title SD  
Name GANNON, LINDA  
Address 7336 PINE CREEK WAY  
City-State-Zip: PORT SAINT LUCIE FL 34986

Title TREASURER  
Name CAMPBELL, GARY  
Address 7421 PINE CREEK WAY  
City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR  
Name POTOSKI, PETER  
Address 7348 PINE CRREK WAY  
City-State-Zip: PORT ST. LUCIE FL 34986

*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:** ED BERKICH

PRES

04/28/2014

Electronic Signature of Signing Officer/Director Detail

Date