

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N41670

**FILED**  
**Mar 24, 2016**  
**Secretary of State**  
**CC7295896423**

**Entity Name:** PINE GLEN AT ABBEY PARK I HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O DAVENPORT PROF PROP MGMT LLC  
6620 LAKE WORTH RD, STE F  
LAKE WORTH, FL 33467

**Current Mailing Address:**

C/O DAVENPORT PROF PROP MGMT LLC  
6620 LAKE WORTH RD, STE F  
LAKE WORTH, FL 33467 US

**FEI Number: 65-0421857**

**Certificate of Status Desired: No**

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

TUCKER & TIGHE PA  
800 E BROWARD BLVD  
SUITE 710  
FORT LAUDERDALE, FL 33301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            SECRETARY  
Name            STEWART, DELORIS  
Address        6620 LAKE WORTH RD, STE F  
City-State-Zip: LAKE WORTH FL 33467

Title            PRESIDENT  
Name            LEE, CHARLES  
Address        6620 LAKE WORTH RD, STE F  
City-State-Zip: LAKE WORTH FL 33467

Title            VP  
Name            YARBROUGH, DUSTY  
Address        6620 LAKE WORTH RD, STE F  
City-State-Zip: LAKE WORTH FL 33467

Title            TREASURER  
Name            WORLEY, TAMARA  
Address        6620 LAKE WORTH ROAD  
                  SUITE F  
City-State-Zip: LAKE WORTH FL 33467

*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: CHARLES LEE**

**PRESIDENT**

**03/24/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date