2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2006
Secretary of State

DOCUMENT# 711320

Entity Name: PINEHURST CONDOMINIUM, INC.

Current Principal Place of Business:

530 CONSTRUCTION LN.
#1
LEHIGH ACRES, FL 33936 US

New Principal Place of Business:

1100 HOMESTAED RD N
LEHIGH ACRES, FL 33936 US

Current Mailing Address:

P.O. BOX 1058
LEHIGH ACRES, FL 33970

New Mailing Address:

P.O.BOX 159
LEHIGH ACRES, FL 33970 US

FEI Number: 59-1286160 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SHIELDS, CHRISTOPHER J
C/O PAVESE, GARNER, HAVERFIELD ET AL
1833 HENDRY ST
FT MYERS, FL 33901 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: VTD ( ) Delete
Name: O'HEARN, CHARLES
Address: 194 JOEL BLVD APT 4
City-St-Zip: LEHIGH ACRES, FL 33972

Title: PD ( ) Delete
Name: LANTZ, NANCY
Address: 3546 RICHARD AVENUE
City-St-Zip: GROVE CITY, OH 43123

Title: SD ( ) Delete
Name: LEMUS, MARTHA
Address: P O BOX 374
City-St-Zip: IMMOKALEE, FL 34143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PYLE, JOHN
Address: 194 JOEL BLVD APT #3
City-St-Zip: LEHIGH ACRES, FL 33972 US

Title: VP (X) Change ( ) Addition
Name: LEMUS, MARTHA
Address: 194 JOEL BLVD APT # 7
City-St-Zip: LEHIGH ACRES, FL 33972 US

Title: ST (X) Change ( ) Addition
Name: BALLANCE, JANICE
Address: 194 JOEL BLVD APT # 1
City-St-Zip: LEHIGH ACRES, FL 33972 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN PYLE P 07/20/2006
Electronic Signature of Signing Officer or Director Date