FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR 16 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 720215 (3)

1. Corporation Name
PINE ACRES CIVIC ASSOC., INC.

Principal Place of Business	Mailing Address
C/O DALE WEBSTER 6525 JACK STREET PUNTA GORDA FL 33982	C/O DALE WEBSTER 6525 JACK STREET PUNTA GORDA FL 33982

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/08/1971
3a. Date of Last Report: 02/17/1994
4. FEI Number: 59-2341403 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

WEBSTER, DALE
6525 JACK ST
PUNTA GORDA FL 33982

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: DALE Webster — 3/11/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	VP ☒ Change ☐ Addition
NAME	HARRIS, GERTRUDE	1.2 NAME	Emmet Schrick
STREET ADDRESS	6601 BERNANDEAN BLVD	1.3 STREET ADDRESS	6736 Bernadean Blvd.
CITY-ST-ZIP	PUNTA GORDA, FL 00000	1.4 CITY-ST-ZIP	Punta Gorda FL 33982
TITLE	P	2.1 TITLE	☐ Change ☐ Addition
NAME	JOINER, THERESE	2.2 NAME	
STREET ADDRESS	1801 BETTY LANE CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	D ☒ Change ☐ Addition
NAME	NEEL, GERALD	3.2 NAME	Therese Joyner
STREET ADDRESS	6832 BERNADEAN BLVD	3.3 STREET ADDRESS	1801 Betty Lane Court
CITY-ST-ZIP	PUNTA GORDA FL	3.4 CITY-ST-ZIP	Punta Gorda FL 33982
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	DANISON, DAN	4.2 NAME	
STREET ADDRESS	6514 JACK ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA, FL 00000	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	WEBER, ROBERT	5.2 NAME	
STREET ADDRESS	6618 JACK ST	5.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA, FL 00000	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	KAZMARK, RAY	6.2 NAME	
STREET ADDRESS	1800 KEITH DRIVE	6.3 STREET ADDRESS	
CITY-ST-ZIP	PUNTA GORDA, FL 00000	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Gertrude Harris — 3/13/95 — 913-639-0832
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0081011