

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722873

FILED  
Feb 06, 2007  
Secretary of State

**Entity Name:** PINE BAY ESTATES HOMEOWNERS ASSOCIATON, INC.

**Current Principal Place of Business:**

5745 S.W. 118TH ST.  
CORAL GABLES, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

5745 S.W. 118TH ST.  
CORAL GABLES, FL 33156

**New Mailing Address:**

**FEI Number:** 59-2192749

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLUMBERG, MORTON B  
11801 S.W. 57TH CT.  
CORAL GABLES, FL 33156 US

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

ELGUEZABAL, BERENICE  
5920 SW 116TH ST  
CORAL GABLES, FL 33156 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: BERENICE ELGUEZABAL

02/06/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: RUBIN, TAD  
Address: 5745 SW 118 ST.  
City-St-Zip: CORAL GABLES, FL 33156

Title: DS ( ) Delete  
Name: MEANS, KABRINA  
Address: 5841 SW 116TH STREET  
City-St-Zip: CORAL GABLES, FL 33156

Title: DAS ( ) Delete  
Name: SEIDEL, CHARLETTE  
Address: 5880 S.W. 117TH STREET  
City-St-Zip: CORAL GABLES, FL 33156

Title: DT ( ) Delete  
Name: BLUMBERG, MORTON  
Address: 11801 S.W. 57TH CT.  
City-St-Zip: CORAL GABLES, FL 33156

Title: DVP ( ) Delete  
Name: ESCAGEDO, ANA MARIA  
Address: 5745 SW 119TH STREET  
City-St-Zip: CORAL GABLES, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT (X) Change ( ) Addition  
Name: ELGUEZABAL, BERENICE  
Address: 5920 SW 116TH ST  
City-St-Zip: CORAL GABLES, FL 33156

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BERENICE ELGUEZABAL

DT

02/06/2007

Electronic Signature of Signing Officer or Director

Date