

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727407

FILED
Apr 03, 2009
Secretary of State

Entity Name: PINE VILLAS ASSOCIATION, INC.

Current Principal Place of Business:

C/O PAUL F MORRIS, JR
438 PINE VILLA DR
ATLANTIS, FL 33462 US

New Principal Place of Business:

Current Mailing Address:

C/O PAUL F MORRIS, JR
438 PINE VILLA DR
ATLANTIS, FL 33462 US

New Mailing Address:

FEI Number: 59-1529439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, PAUL F JR
438 PINE VILLA DR
ATLANTIS, FL 33462 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: D () Delete
Name: GOUGEON, CAROLE
Address: 454 PINE VILLA DR
City-St-Zip: ATLANTIS, FL 33462

Title: D () Delete
Name: CAMERON, DOUGLAS
Address: 449 PINE VILLA DR
City-St-Zip: ATLANTIS, FL 33462

Title: P () Delete
Name: BALLENTINE, MICHAEL
Address: 440 PINE VILLA DRIVE
City-St-Zip: ATLANTIS, FL 33462

Title: D () Delete
Name: PALMEIZNO, CAROL
Address: 453 PINE VILLE DR
City-St-Zip: LAKE WORTH, FL 33462

Title: TD () Delete
Name: MORISS, PAUL F
Address: 438 PINE VILLA DR
City-St-Zip: ATLANTIS, FL 33462

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GOUGEON, CAROLE
Address: 454 PINE VILLA DR
City-St-Zip: ATLANTIS, FL 33462 US

Title: D (X) Change () Addition
Name: CAMERON, DOUGLAS
Address: 449 PINE VILLA DR
City-St-Zip: ATLANTIS, FL 33462 US

Title: P (X) Change () Addition
Name: BALLENTINE, MICHAEL
Address: 440 PINE VILLA DRIVE
City-St-Zip: ATLANTIS, FL 33462 US

Title: D (X) Change () Addition
Name: PALMEIZNO, CAROL
Address: 453 PINE VILLE DR
City-St-Zip: LAKE WORTH, FL 33462 US

Title: TD (X) Change () Addition
Name: MORISS, PAUL F
Address: 438 PINE VILLA DR
City-St-Zip: ATLANTIS, FL 33462 US

Title: D () Change (X) Addition
Name: MACON, CHARLENE
Address: 427 PINE VILLA DR
City-St-Zip: ATLANTIS, FL 33462 US

I hereby certify that the information supplied with this filing does not qualify 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: PAUL F. MORRIS, JR

TD

04/03/2009

Electronic Signature of Signing Officer or Director

Date