

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727743

FILED
Apr 26, 2005
Secretary of State

Entity Name: PINELOCH LAKE CONDOMINIUM APARTMENTS, INC.

Current Principal Place of Business:

2883 SOUTH OSCEOLA AVENUE
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

2883 SOUTH OSCEOLA AVENUE
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-1730939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUMBEE, ALAN B
2893 S. OSCEOLA AVE.
#E-5
ORLANDO, FL 32806 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: DP () Delete
Name: CUMBEE, ALAN B
Address: 2893 S OSCEOLA AVENUE, #E-5
City-St-Zip: ORLANDO, FL 32806

Title: D () Delete
Name: DRUMMOND, DAN
Address: 540 MANDALAY ROAD
City-St-Zip: ORLANDO, FL 32809

Title: DV () Delete
Name: MITCHELL, KIRK
Address: 1642 WINDRIFT ROAD
City-St-Zip: ORLANDO, FL 32809

Title: DS () Delete
Name: WIGGINS, DAVID
Address: 2883 S OSCEOLA AVENUE, #B-8
City-St-Zip: ORLANDO, FL 32806

Title: DT () Delete
Name: JACKSON, ROBERTS
Address: 2887 S OSCEOLA AVENUE, #D-3
City-St-Zip: ORLANDO, FL 32806

Title: D () Delete
Name: DARR, DIANE
Address: 508 OLD ORCHARD LANE
City-St-Zip: ORLANDO, FL 32809

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

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

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 Section 119.07(3)(i), 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: ALAN B. CUMBEE

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

Date