

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 29, 2012
Secretary of State

DOCUMENT# 730816

Entity Name: COUNTRY PINES CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**% GRS MANAGEMENT, INC.
8181 NW 154 ST. SUITE 270
MIAMI LAKES, FL 33016 US**New Principal Place of Business:**% GRS MANAGEMENT, INC.
8140 NW 155 ST. SUITE 101
MIAMI LAKES, FL 33016 US**Current Mailing Address:**% GRS MANAGEMENT, INC.
8181 NW 154 ST. SUITE 270
MIAMI LAKES, FL 33016 US**New Mailing Address:**% GRS MANAGEMENT, INC.
8140 NW 155 ST. SUITE 101
MIAMI LAKES, FL 33016 US**FEI Number:** 59-2275937**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**GRS MANAGEMENT OF BROWARD INC.
8181 NW 154TH STREET
SUITE 270
MIAMI LAKES, FL 33016 US**Name and Address of New Registered Agent:**EISENGER, BROWN, LEWIS, FRANKEL PA
4000 HOLLYWOOD BLVD.
SUITE 265 SO
HOLLYWOOD, FL 33021 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: DENNIS EISENGER PA

10/29/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** VPD
Name: VENTURA, DONNA
Address: 8140 NW 155 STREET 101
City-St-Zip: MIAMI LAKES, FL 33016**Title:** S
Name: BENNET, KELLEY
Address: 8140 NW 155 STREET 101
City-St-Zip: MIAMI LAKES, FL 33016**Title:** PD
Name: ROSSY, ELIO
Address: 8140 NW 155TH STREET 101
City-St-Zip: MIAMI LAKES, FL 33016**Title:** D
Name: WAITE, THOMPSON L
Address: 8140 NW 155TH STREET 101
City-St-Zip: MIAMI LAKES, FL 33016**Title:** T
Name: JAFFE, SEAN
Address: 8140 NW 155TH STREET 101
City-St-Zip: MIAMI LAKES, FL 33016

I hereby 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 all other like empowered.

SIGNATURE: ELIO ROSSY

PRES

10/29/2012

Electronic Signature of Signing Officer or Director

Date