

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737244

FILED
Jan 18, 2011
Secretary of State

Entity Name: PIONEER SETTLEMENT FOR THE CREATIVE ARTS, INC.

Current Principal Place of Business:

1776 LIGHFOOT LANE
BARBERVILLE, FL 321050006 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 6
BARBERVILLE, FL 321050006 US

New Mailing Address:

FEI Number: 59-1783985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BENSON, GUDRUN F
4965 UPSON AVE
DELEON SPRINGS, FL 32130 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: PD
Name: RINDERLE, EDWARD
Address: 709 PINE TREE CT
City-St-Zip: DELAND, FL 32724

Title: TD
Name: THOMAS, DENNIS W
Address: P.O. BOX 1982
City-St-Zip: MIDDLEBURG, FL 32050

Title: SD
Name: FRASER, ALLEN L
Address: 101 LAKE GROVE DR
City-St-Zip: CRESCENT CITY, FL 32110

Title: VD
Name: CASE, JOHN W
Address: 131 HIGHLAND AVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: MD
Name: BENSON, GUDRUN F
Address: 4965 UPSON AVE
City-St-Zip: DELEON SPRINGS, FL 32130

Title: MD
Name: JOHNSON, DIANA L
Address: 225 CARLISLE RD
City-St-Zip: PIERSON, FL 32180

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: GUDRUN F. BENSON

MD

01/18/2011

Electronic Signature of Signing Officer or Director

Date