2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742107

FILED Apr 24, 2007 Secretary of State

Entity Name: PINELAKE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2200 NORTH FEDERAL HWY. SUITE 212 BOCA RATON, FL 33431 **New Mailing Address: Current Mailing Address:** C/O PALM BEACH PROPERTY MANAGEMENT 2200 NORTH FEDERAL HWY. #212 BOCA RATON, FL 33431 FEI Number: 59-1810416 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PLAZURE, LENNIE 2200 NORTH FEDERAL HWY. SUITE 212 BOCA RATON, FL 33431 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition KATZ, MYRON GOLDMAN, JAMES Name: Name: 3505 BRIDGEWOOD DR. Address: 3406 BRIDGEWOOD DR. Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOCA RATON, FL 33434 Title: Title: (X) Change () Addition () Delete LEVY, HENRY Name: SUSSMAN, MEL Name: Address: 3301 BRIDGEWOOD DRIVE Address: 3308 BRIDGEWOOD DRIVE City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOCA RATON, FL 33434 Title: () Delete Title: (X) Change () Addition GOLDMAN, JIM PANICO, SAL Name: Name: 3406 BRIDGEWOOD DR. 3503 BRIDGEWOOD DR. Address: Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOCA RATON, FL 33434 (X) Change () Addition Title: VΡ () Delete Title: VPD Name: DOWNEY, JOHN Name: SCHUMAN RON 3501 BRIDGEWOOD DR 3502 BRIDGEWOOD DR Address: Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: BOCA RATON, FL 33434 Title: () Delete Title: () Change (X) Addition Name: Name: CHALE, ALLEN 3809 BRIDGEWOOD DRIVE Address: Address: City-St-Zip: City-St-Zip: BOCA RATON, FL 33434

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: JAMES GOLDMAN PTD 04/24/2007