

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2008 8:00 am
Secretary of State

04-03-2008 90027 004 ****61.25

DOCUMENT # 746071 1. Entity Name PILOT COUNTRY ESTATES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 11711 PILOT COUNTRY DR. SPRING HILL, FL 34610 US			Mailing Address PO BOX 444 LAND O'LAKES, FL 34639-0444 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent SAUNDERS, CRAIG C 11711 PILOT COUNTRY DR. SPRING HILL, FL 34610			7. Name and Address of New Registered Agent Name JOEL F. GIURTINO Street Address (P.O. Box Number is Not Acceptable) 11626 DRIVER LANE City SPRING HILL FL Zip Code 34610		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>JOEL F. GIURTINO, TREASURER</u> <u>Joel F. Giurtino</u> <u>3/21/08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	SAFFOLD, MICHAEL		STREET ADDRESS		
CITY-ST-ZIP	12154 DRIVER LANE SPRINGHILL, FL 34610		CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	WHITTAKER, EDWARD		STREET ADDRESS		
CITY-ST-ZIP	24020 STARLING CIRCLE LAND O'LAKES, FL 34639		CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	VORAS, STEVE		STREET ADDRESS		
CITY-ST-ZIP	11610 PILOT COUNTRY DR SPRING HILL, FL 34610		CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	D PRINCE, PAUL		STREET ADDRESS		
CITY-ST-ZIP	11649 PILOT COUNTRY DR SPRING HILL, FL 34610		CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	ED, RICHARDS		STREET ADDRESS		
CITY-ST-ZIP	12097 DRIVER LN. SPRING HILL, FL 34610		CITY-ST-ZIP		
TITLE	NAME	<input checked="" type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	T. SAUNDERS, CRAIG C		STREET ADDRESS	JOEL F. GIURTINO 11626 DRIVER LANE SPRING HILL, FL 34610	
CITY-ST-ZIP	11711 PILOT COUNTRY DR. SPRING HILL, FL 34610		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Joel F. Giurtino</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>3/21/08</u> <small>Date Daytime Phone #</small>		