

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747524

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** PINE ISLAND CANAL MOBILE HOME IMPROVEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

1681 BASS AVENUE  
SEVILLE, FL 32190

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 112  
SEVILLE, FL 32190

**New Mailing Address:**

**FEI Number:** 59-0388034

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HOERL, MARSHALL T,D  
1681 BASS AVENUE  
SEVILLE, FL 32190 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: P  
Name: OXIER, STEVE  
Address: 1681 BASS AVENUE  
City-St-Zip: SEVILLE, FL 32190

Title: VP  
Name: BARUXES, GEORGE  
Address: 1607 BASS AVE.  
City-St-Zip: SEVILLE, FL 32190

Title: S  
Name: LONGWAY, KAREN  
Address: 1621 BASS AVE.  
City-St-Zip: SEVILLE, FL 32190

Title: D  
Name: ALDRIDGE, ROLAND  
Address: 1636 BASS AVENUE  
City-St-Zip: SEVILLE, FL 32190

Title: D  
Name: LONGWAY, DARWIN  
Address: 1621 BASS AVENUE  
City-St-Zip: SEVILLE, FL 32190

Title: D  
Name: BARUXES, LUCINDA  
Address: 1607 BASS AVE.  
City-St-Zip: SEVILLE, FL 32190

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: MARSHALL HOERL

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04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date