2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748558

FILED Apr 28, 2010 Secretary of State

Entity Name: THE PINES OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1400 NEBRASKA AVE. FT PIERCE, FL 34950 US

Current Mailing Address: New Mailing Address:

1400 NEBRASKA AVE.

FT PIERCE, FL 34950 US

FEI Number: 59-2167724 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:

MCCARTY, JAMES H JR 926 N.W. 13TH STREET GAINESVILLE, FL 32601

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

US

Date

OFFICERS AND DIRECTORS:

Title: F

Name: HARRIS, KEITH
Address: 1440 LAWNWOOD CIR.
City-St-Zip: FORT PIERCE, FL 34950

Title: D

 Name:
 BURDGE, ROBERT

 Address:
 1302 NEBRASKA

 City-St-Zip:
 FORT PIERCE, FL 34950

Title: S

 Name:
 ODOM, CATHY

 Address:
 1448 LAWN WOOD CIR

 City-St-Zip:
 FORT PIERCE, FL 34950

Title: T,V

Name: HARTNETT, PEGGIE
Address: 1458 N. LAWNWOOD CIR.
City-St-Zip: FORT PIERCE, FL 34950

Title: D

Name: CONRADO, MARIA
Address: 1440 N. LAWNWOOD CIR.
City-St-Zip: FORT PIERCE, FL 34950

Title: [

Name: PETERSON, DOROTHY
Address: 1440 N. LAWNWOOD CIR
City-St-Zip: FORT PIERCE, FL 34950

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: CATHY ODOM S 04/28/2010