

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749166

FILED
Feb 13, 2006
Secretary of State

Entity Name: GOLF N' PINES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3860 MALEC CIR.
SARASOTA, FL 34233 US

New Principal Place of Business:

Current Mailing Address:

3860 MALEC CIR.
SARASOTA, FL 34233 US

New Mailing Address:

FEI Number: 59-2052373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEZZELLA, MARIO
3860 MALEC CIR
SARASOTA, FL 34233 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: D () Delete
Name: JAKUBIUK, JANCK
Address: 2640 STICKNEY POINT ROAD
City-St-Zip: SARASOTA, FL 34231

Title: TD/P () Delete
Name: PEZZELLA, MARIO
Address: 3860 MALEC CIR
City-St-Zip: SARASOTA, FL 34233

Title: SD () Delete
Name: DUNCAN, BENNICE
Address: 6300 MIDNIGHT PASS RD.
City-St-Zip: SARSOTA, FL 34242

Title: VP () Delete
Name: PEZZELLA, MARIO V
Address: 3726 MUNDY RIDGE DR
City-St-Zip: SARASOTA, FL 34233

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: DUNCAN, BERNICE
Address: 6300 MIDNIGHT PASS RD.
City-St-Zip: SARSOTA, FL 34242

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARIO PEZZELLA

TD/P

02/13/2006

Electronic Signature of Signing Officer or Director

Date