2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2005
Secretary of State

DOCUMENT# 749957

Entity Name: PINE TREE PARK HOME OWNERS' ASSOCIATION INC.

Current Principal Place of Business:

614 CAMELLIA
DEERFIELD BCH, FL 33442

New Principal Place of Business:

Current Mailing Address:

614 CAMELLIA
DEERFIELD BCH, FL 33442

New Mailing Address:

FEI Number: 59-2147593 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TREBBIEN, VIVIAN
614 CAMELIA
DEERFIELD BEACH, FL 33442 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 ( ) Delete
Name: CASSIDY, EILEEN
Address: 425 E BOUGAINVILLE
City-St-Zip: DEERFIELD BCH, FL 33442

Title: VP ( ) Delete
Name: EVANCHUCK, DUANE
Address: 611 JASMINE
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VPD ( ) Delete
Name: GARNEAU, MARCEL
Address: 1322 POINSETTIA
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: T ( ) Delete
Name: HUME, JENNIFER
Address: 1308 W. BOUGAINVILLEA
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: SD ( ) Delete
Name: MORRISON, DONNA
Address: 421 E. BOUGAINVILLEA
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: T ( ) Delete
Name: THERIAULT, EILEEN
Address: 1311 POINSETTIA DRIVE
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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 Section 119.07(3)(i), 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: JENNIFER HUME T 02/12/2005
Electronic Signature of Signing Officer or Director — Date