

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 750344

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** PINEWOODS UNIT FOUR, INC.

**Current Principal Place of Business:**

2346 PINEWOODS CIRCLE  
NAPLES, FL 34105 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 10146  
NAPLES, FL 34101 US

**New Mailing Address:**

**FEI Number:** 59-2552587

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CAMIL, JOANN  
2346 PINEWOODS CIRCLE  
NAPLES, FL 34105 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: DST  
Name: MATHIAS, PHILLIP  
Address: 2240 PINEWOODS CIRCLE  
City-St-Zip: NAPLES, FL 34105

Title: DP  
Name: SIMPSON, HARRISON  
Address: 4447 WILDER ROAD  
City-St-Zip: NAPLES, FL 34105

Title: DV  
Name: WORREL, JEAN  
Address: 2328 PINEWOODS CIRCLE  
City-St-Zip: NAPLES, FL 34105

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: HARRISON M SIMPSON

DP

04/30/2012

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

\_\_\_\_\_  
Date