2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750352

Apr 27, 2009 Secretary of State

Entity Name: PINETRAIL EAST HOMEOWNERS ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 123 S. CONGRESS AVE. #132 4588 NW 5TH CT DELRAY BEACH, FL 33445 BOYNTON BEACH, FL 33426 US US **Current Mailing Address: New Mailing Address:** 123 S. CONGRESS AVE. #132 PO BOX 7271 DELRAY BEACH, FL 334827271 BOYNTON BEACH, FL 33426 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARTYBRIDGE, BESSIE 4588 NW 5TH CT. DELRAY BEACH, FL 33445 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete KUH, RONALD A Name: Name: 634 NW 45TH DRIVE Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: Title: VD () Delete Title: (X) Change () Addition Name: GORMAN, STEVE Name: CHRISTOS, JEANETT Address: 636 NW 45TH WAY Address: 584 NW 45TH WAY City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: DELRAY BEACH, FL 33445 Title: () Delete Title: () Change () Addition ARTYBRIDGE, BESSIE Name: Name: Address: 4588 NW 5TH CT Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: Title: SD () Delete Title: SD (X) Change () Addition Name: GRIFFIN, PAULINE Name: GEATHERS, LEROY 636 NW 45TH DRIVE Address: 616 NW 45TH DRIVE Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information supplied with this filing does not qualify 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: BESSIE ARTYBRIDGE Ρ 04/27/2009