

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750522

FILED  
Apr 04, 2011  
Secretary of State

**Entity Name:** THE PINES OF BOCA DEL MAR HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6138 ELMWOOD DRIVE  
BOCA RATON, FL 33433 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 810982  
BOCA RATON, FL 334330982 US

**New Mailing Address:**

FEI Number: 59-2602703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOSEPH S GORLICKI  
6138 ELMWOOD DR  
BOCA RATON, FL 33433 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: VP  
Name: JENSEN, VICTOR  
Address: 21825 BANYANWOOD ROAD  
City-St-Zip: BOCA RATON, FL 33433

Title: P  
Name: RAY, JOHN T  
Address: 21840 BEACHNUT DR  
City-St-Zip: BOCA RATON, FL 33433

Title: T  
Name: GORLICKI, JOSEPH S  
Address: 6138 ELMWOOD DRIVE  
City-St-Zip: BOCA RATON, FL 33433

Title: S  
Name: HAMILTON, DONALD  
Address: 21749 MOUNTAIN SUGAR LANE  
City-St-Zip: BOCA RATON, FL 33433

Title: M  
Name: FISHER, JIM  
Address: 21789 LINWOOD WAY  
City-St-Zip: BOCA RATON, FL 33433

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: JOSEPH S. GORLICKI

T

04/04/2011

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

\_\_\_\_\_  
Date