## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

#### **DOCUMENT #754083**

1. Entity Name

PINEWOOD VILLAGE OF MELBOURNE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

% PLATINUM COAST MANAGEMENT

2625 N HARBOR CITY BLVD #2 MELBOURNE, FL 32935 US Mailing Address

% PLATINUM COAST MANAGEMENT 2625 N HARBOR CITY BLVD #2 MELBOURNE, FL 32935 US

### FILED Jan 18, 2005 8:00 am Secretary of State

01-18-2005 90027 002 \*\*\*\*61.25



01102005 No Chg-NP

CR2E037 (10/03)

FEI Number
 59-2264182

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent -

SACHANANDAN, GUBBI 3001 THRUSH D. 125 MELBOURNE, FL 32935



ENTERED

# DO NOT WRITE IN THIS SPACE

		I.			
8. The above the obligation of the state of	named entity submits this statement for the p his of registered agent.	<u> </u>		· ·	
and a profession of	Signature, typed or printed name of registered agent and title if	f applicable. (NOTE: Registered A	gent signature	required when reinstating)	DATE
!	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financi "Trust Fund Contribution.".	ng	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE	Р				
NAME	SACHIDANANDAN, GUBBI				
STREET ADDRESS	3001 THURSH DR 125				
CITY-ST-ZIP	MELBOURNE, FL 32935	I			
TITLE	D				
NAME	MCGARRIGLE, MARY				
STREET ADDRESS	3001 THRUSH DRIVE, NO. 113				
CITY-ST-ZIP	MELBOURNE, FL				
TITLE	€V,P.				
NAME	TOLEDO, ROBERT				and the second s
STREET ADDRESS	2935 THRUSH DR. 141				TAIDITE
CITY-ST-ZIP	MELBOURNE, FL 32935			טא טע	T WRITE
TITLE	D			INI THIC	CDACE
NAME	MORRISON, CONNIE			IIA I LIIS	SSPACE
STREET ADDRESS	3001 THRUSH DR. 115				•
CITY-ST-ZIP	MELBOURNE, FL				
TITLE	8 2 - 1	70			
NAME	JESPERSEN MARY ANN JOHN	IAOTHINH			
STREET ADORESS	2935 THRUSH DR 134 300/	Thrush Dr #112			
CITY-ST-ZIP	MELBOURNE, FL 32935 Melb.	F/ 32935 #110			The second secon
TITLE NAME	FAIN CHARLES RICHARD	Waughi	* 1.	3 36 6 6	
STREET ADDRESS	2795 THRUSH DR. 127			The second secon	the community of the second of the contract of
CITY-ST-ZIP	MELBOURNE, FL 32935			to of the state of	اور پیدا چین د بیمیوست ده وسم جامه داشت.
12. I hereby o	certify that the information supplied with this fil	ing does not qualify for the exemi	ntion stated	d in Section 119.07(3)(i). Florida	Statutes. I further certify that the information

The boy certify that the information supplied with this filling does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CIGNATUR	ᆮ.

G.S. Sah. W

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

### 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **ATTACHMENT**

### **DOCUMENT #754083**

1. Entity Name

PINEWOOD VILLAGE OF MELBOURNE CONDOMINIUM ASSOCIATION, INC.



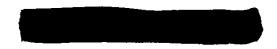
Principal Place of Business

% PLATINUM COAST MANAGEMENT 2625 N HARBOR CITY BLVD #2 MELBOURNE, FL 32935 US

Mailing Address

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4000/3/7



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	6.	Name	and A	Address	of Current	Registered	Agent	-
IAN/	ANDA	N, G	UBBI					

SACH 3001 THRUSH D. MELBOURNE, FL 32935

SIGNATURE:

DO	NOT	WRITE
IN	THIS	<b>SPACE</b>

Date

Daytime Phone #

8. 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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE G. S. Sachish								
	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered Ag	ent signature	required when reinstating)	DATE			
	Filing Fee is \$61.25 Due by May 1, 2005	<ol> <li>Election Campaign Financin Trust Fund Contribution.</li> </ol>	9 🗆	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SACHIDANANDAN GUBBI BAC 3001 THURSH DR 125 AC/b.	bara Padua vo Thrush Dr=145 F/ 32935						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCGARRIGLE, MARY 3001 THRUSH DRIVE, NO. 113 MELBOURNE, FL							
NAME STREET ADDRESS CITY-ST-ZIP	D. TOLEDO, ROBERT 2935 THRUSH DR. 141 MELBOURNE, FL 32935			DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORRISON, CONNIE 3001 THRUSH DR. 115 MELBOURNE, FL			IN	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JESPERSEN, MARY ANN 2935 FARUSH DR 134 MELBOURNE, FL 32935							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FAIN, CHARLES 2795 THRUSH DR. 127 MELBOURNE, FL. 32935							
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.								