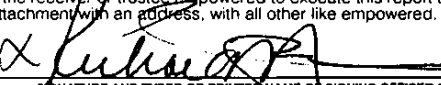


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90098 025 ****61.25

DOCUMENT # 754389 1. Entity Name BENT PINE COMMUNITY ASSOCIATION, INC.					
Principal Place of Business ELLIOTT MERRILL MGMT 835 20TH PL VERO BEACH, FL 32960 US			Mailing Address ELLIOTT MERRILL MGMT 835 20TH PL VERO BEACH, FL 32960 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		40047476  01222007 Chg-NP CR2E037 (12/06)	
4. FEI Number 65-0048675				☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MERRILL, KAREN 835 20TH PLACE VERO BEACH, FL 32960			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD LIBBY, THEODROE 5837 MAGNOLIA LN VERO BEACH, FL 32967	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>PRESIDENT</i> <i>RICHARD FANA</i> <i>5920 CLUBHOUSE DR</i> <i>VERO BCH FL 32967</i>	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD ARSENAULT, AIME 111 PRESTWICK CIR VERO BEACH, FL 32963	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>James McCabe</i> <i>5849 Magnolia Ln</i> <i>VERO BCH FL 32967</i>	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BROWN, LAWRENCE 5720 TURNBERRY LANE VERO BEACH, FL 32967	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WALWORD, LEONARD 5840 TURNBERRY LANE VERO BEACH, FL 32967	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>SD</i> <i>JUNE JACOBS</i> <i>5795 Glen Eagle Ln</i> <i>VERO BCH FL 32967</i>	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>JM McCabe</i>	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
SIGNATURE: 			Date 3/15/07 Daytime Phone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					