

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 756370 (3)

1. Corporation Name

PINEWOOD XIII TOWNHOMES OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

1501 R. J. CONLAN BLVD #1
PALM BAY FL 32905

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PALM BAY FL 32905

3. Date Incorporated or Qualified
02/16/1981

3a. Date of Last Report
04/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-3069523

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

24

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JONES, RICHARD O.
1250 W. EAU GALLIE
SUITE J
MELBOURNE FL 32935

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(None. Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME AUSTIN, RENEE
STREET ADDRESS 3512 TREERIDGE LANE NE
CITY - ST - ZIP PALM BAY FL

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

TITLE TD ☐ DELETE

NAME SAWYER, ALEX
STREET ADDRESS 1178 HEATHERGLEN CIRCLE
CITY - ST - ZIP MELBOURNE FL

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

TITLE SD ☐ DELETE

NAME MCGEE, DARCI
STREET ADDRESS 3514 TREERIDGE LANE NE
CITY - ST - ZIP PALM BAY FL

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-96

Date

Daytime Phone #

CR2E037 (12/95)