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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 757440

1. Corporation Name PINE LAKES VILLAS CONDOMINIUM AT PALM COAST, INC

Principal Place of Business % 27 VILLAGE CIRCLE PO BOX 351826 PALM COAST FL 32135-1826 Mailing Address % 27 VILLAGE CIRCLE PO BOX 351826 PALM COAST FL 32135-1826



2. Principal Place of Business 2a. Mailing Address 3. Date Incorporated or Qualified 04/07/1981 4. FEI Number 59-2211956 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent PALM COAST PROPERTY MANAGEMENT 296 PALM COAST PWY N.E. SUITE 7 PALM COAST FL 32137 10. Name and Address of New Registered Agent

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. SIGNATURE: [Signature] 1/12/99

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (11/98)