

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760875

FILED  
Jan 31, 2009  
Secretary of State

**Entity Name:** PINELAKE OF LEE COUNTY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2176 TREEHAVEN CIR S  
FT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

2176 TREEHAVEN CIR S  
FT MYERS, FL 33907

**New Mailing Address:**

**FEI Number:** 59-2203836

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

URBANCIC, JEAN  
2176 TREEHAVEN CIR S  
FORT MYERS, FL 33907 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: P ( ) Delete  
Name: EWEN, GARY  
Address: 5544 NEW PINE LAKE DR  
City-St-Zip: FORT MYERS, FL 33907

Title: VP ( ) Delete  
Name: IMBODY, DENNIS  
Address: 2175 TREEHAVEN  
City-St-Zip: FORT MYERS, FL 33907

Title: S ( ) Delete  
Name: LEOVC, CAROL  
Address: 5568 NEW PINE LAKE DR  
City-St-Zip: FORT MYERS, FL 33907

Title: T ( ) Delete  
Name: URBANCIC, JEAN  
Address: 2200 TREEHAVEN CIR.  
City-St-Zip: FORT MYERS, FL 33907

Title: D (X) Delete  
Name: BELL, RON  
Address: 2184 TREEHAVEN CIR  
City-St-Zip: FORT MYERS, FL 33907

Title: D (X) Delete  
Name: SHERER, TERRY  
Address: 2177 TRAILWINDS DR  
City-St-Zip: FORT MYERS, FL 33907

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: BELL, RON  
Address: 2184 TREEHAVEN CIR S.  
City-St-Zip: FORT MYERS, FL 33907

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JEAN URBANCIC

T

01/31/2009

Electronic Signature of Signing Officer or Director

Date