

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760980

FILED
May 12, 2011
Secretary of State

Entity Name: PINE GROVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8695 COLLEGE PKWY., STE 1261
C/O FRAN ROTINO
FT. MYERS, FL 33919 US

New Principal Place of Business:

%GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 US

Current Mailing Address:

C/O CAPITAL PROPERTIES
3364 CLEVELAND AVE
FORT MYERS, FL 33901

New Mailing Address:

%GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 US

FEI Number: 59-2157361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAGER, KENNETH D
CAPITAL PROPERTIES GROUP
3364 CLEVELAND AVE
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

WEIDNER, RALPH L
%GULF BREEZE MANAGEMENT SERVICES, LLC
8910 TERRENE COURT, SUITE 200
BONITA SPRINGS, FL 34135 US

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: RALPH L. WEIDNER, CAM

05/12/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD
Name: MUMLEY, MARK
Address: 7165 KOLA TERRACE, #16
City-St-Zip: FT. MYERS, FL 33907

Title: PD
Name: CLEMENTS, AUDREY
Address: 7195 LYLE TERRACE, #4
City-St-Zip: FORT MYERS, FL 33907

Title: T
Name: TODD, JOAN
Address: 7130 KOLA TERRACE, #1
City-St-Zip: FORT MYERS, FL 33907

Title: VP
Name: AIKEN, DAVID
Address: 7132 PENNER LANE, #28
City-St-Zip: FORT MYERS, FL 33907

Title: D
Name: WOODMAN, EILEEN
Address: 7165 ALMENDRO TERRACE, #1
City-St-Zip: FORT MYERS, FL 33907

I hereby 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 all other like empowered.

SIGNATURE: AUDREY CLEMENTS

PRES

05/12/2011

Electronic Signature of Signing Officer or Director

Date