

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766626

FILED  
Apr 18, 2012  
Secretary of State

**Entity Name:** PINE HAVEN CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O RESORT MGMT  
2685 HORSESHOE DR. S. #215  
NAPLES, FL 34104 US

**New Principal Place of Business:**

6704 LONE OAK BLVD  
NAPLES, FL 34109 US

**Current Mailing Address:**

C/O RESORT MGMT  
2685 HORSESHOE DR. S. #215  
NAPLES, FL 34104 US

**New Mailing Address:**

6704 LONE OAK BLVD  
NAPLES, FL 34104 US

**FEI Number:** 59-2408799

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAW OFFICE OF JAMIE GREUSEL  
1104 N. COLLIER BLVD  
MARCO ISLAND, FL 34145 US

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

GUARDIAN PROPERTY MANAGEMENT  
6704 LONE OAK BLVD  
NAPLES, FL 34109 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: BYRON ROSS

04/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GOLDING, JOSEPH  
Address: 28281 PINE HAVEN WAY # 186  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP  
Name: RANDALL, RITA  
Address: 28231 PINE HAVEN WAY # 161  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: T  
Name: MULLEN, JAMES  
Address: 28161 PINE HAVEN WAY # 136  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: S  
Name: STEWART, ELLEN  
Address: 28200 PINE HAVEN WAY #49  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D  
Name: RISCH, DON  
Address: 28220 PINE HAVEN WAY #61  
City-St-Zip: BONITA SPRINGS, FL 34135

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: BYRON L ROSS

MGR

04/18/2012

Electronic Signature of Signing Officer or Director

Date