2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006
Secretary of State

DOCUMENT# 766744

Entity Name: PINE TREE DRIVE ASSOCIATION, INC.

Current Principal Place of Business:

5749 PINE TREE DR
SANIBEL, FL 33957 US

New Principal Place of Business:

Current Mailing Address:

5749 PINE TREE DR
SANIBEL, FL 33957 US

New Mailing Address:

FEI Number: 59-2401606 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUCKLO, MICHAEL P
5749 PINE TREE DR.
SANIBEL, FL 33957 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: PRES ( ) Delete
Name: BUCKLO, MICHAEL P
Address: 5749 PINE TREE DR
City-St-Zip: SANIBEL, FL 33957

Title: VP ( ) Delete
Name: ORKIN, ERIC
Address: 5810 PINE TREE DR
City-St-Zip: SANIBEL, FL 33957

Title: S ( ) Delete
Name: BELLISTRI, JUDY
Address: 5869 PINE TREE DR
City-St-Zip: SANIBEL, FL 33957

Title: T ( ) Delete
Name: BUCKLO, HARI
Address: 5749 PINE TREE DR
City-St-Zip: SANIBEL, FL 33957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: ORKIN, ERIC B
Address: 5810 PINE TREE DR
City-St-Zip: SANIBEL, FL 33957

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 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: MICHAEL P. BUCKLO PRES 01/25/2006

Electronic Signature of Signing Officer or Director Date