

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770106

FILED
Jan 20, 2009
Secretary of State

Entity Name: THE LAKES OF PINE RUN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

100 LIMWOOD PL
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

100 LIMWOOD PL
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-2421866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEARSON, SUE
220-6 LEMON TREE LANE
ORMOND BEACH, FL 32174 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: SCHMIDT, TOM
Address: 220-3 LEMON TREE LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP () Delete
Name: HARRIS, MONA
Address: 140-2 LIMWOOD PLACE
City-St-Zip: ORMOND BEACH, FL 32174

Title: TRES () Delete
Name: RITTER, ANDY
Address: 201-8 ORANGE GROVE DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: DIR () Delete
Name: LAWSON, CLYDE II
Address: 110-2 LIMWOOD PL
City-St-Zip: ORMOND BEACH, FL 32174

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: RITTER, ANDREW
Address: 2711 N HALIFAX AVE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: VP (X) Change () Addition
Name: SOTTARDI, MARIE
Address: 110-1 LIMWOOD PLACE
City-St-Zip: ORMOND BEACH, FL 32174

Title: TRES (X) Change () Addition
Name: MCCARTHY, ROBERT
Address: 251-10 ORANGE GROVE DR
City-St-Zip: ORMOND BEACH, FL 32174

Title: DIR (X) Change () Addition
Name: MCCAFFREY, JOHANNA II
Address: 210-8 LEMON TREE LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: SEC () Change (X) Addition
Name: PEARSON, SUSAN
Address: 220-6 LEMON TREE LANE
City-St-Zip: ORMOND BEACH, FL 32174

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: ANDREW RITTER

PRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date