2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#770248

FILED Aug 16, 2006 Secretary of State

Entity Name: PVSW HOMEOWNERS' ASSOCIATION, INC.

US

US

Current Principal Place of Business: New Principal Place of Business:

1504 WINDJAMMER LANE ST. AUGUSTINE, FL 32084

Current Mailing Address: New Mailing Address:

1504 WINDJAMMER LANE ST. AUGUSTINE, FL 32084

FEI Number: 59-2433779 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SCHNEIDER, DIANE RON, PIERLE 1101 SANDDOLLAR CT. 301 FIFTH ST

ST. AUGUSTINE, FL 32084 US ST AUGUSTINE, FL 32080 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: RON PIERLE 08/16/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 SCHNEIDER, DIANE
 Name:
 PIERLE, RON

 Address:
 P.O. BOX 1746
 Address:
 1504 WINDJAMMER LA

 City-St-Zip:
 ST. AUGUSTINE, FL 32085
 City-St-Zip:
 ST. AUGUSTINE, FL 32084

Title: SD () Delete Title: VP (X) Change () Addition

Name:MORRIS, GIENICEName:SPADAFORA, DUILIOAddress:214 4TH ST NORTH BEACHAddress:1504 WINDJAMMER LACity-St-Zip:SAINT AUGUSTINE, FL 32084City-St-Zip:SAINT AUGUSTINE, FL 32084

Title: SEC () Change (X) Addition

 Name:
 Name:
 ROBINSON, CYNTHIA

 Address:
 Address:
 1504 WINDJAMMER LA

 City-St-Zip:
 City-St-Zip:
 ST AUGUSTINE, FL 32084

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: DUILIO SPADAFORA VP 08/16/2006