

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000002346

1. Entity Name

PINFISH POINT HOME OWNER'S ASSOCIATION, INC.



Principal Place of Business

900 E PINE STREET
SUITE 126
ENGLEWOOD FL 34223

Mailing Address

45 SHERMAN GROVE
SPENCER MA 10562

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-3702724

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MURTHA, THOMAS E CPA
900 E PINE STREET #126
ENGLEWOOD FL 34223

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PVST
NAME SANDSTROM, KENNETH J ☐ Delete
STREET ADDRESS 45 SHERMAN GROVE
CITY- ST- ZIP SPENCER MA 10562

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS U000000049953
CITY- ST- ZIP 02/13/04-80044-007 61.25

TITLE D
NAME SANDSTROM, KENNETH J ☐ Delete
STREET ADDRESS 45 SHERMAN GROVE
CITY- ST- ZIP SPENCER MA 10562

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE D
NAME GAY, JULIE ☐ Delete
STREET ADDRESS 45 SHERMAN GROVE
CITY- ST- ZIP SPENCER MA 10562

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE D
NAME BERNTSSON, ROBERT H ☐ Delete
STREET ADDRESS 1804 MURDOCK CIRCLE
CITY- ST- ZIP PORT CHARLOTTE FL 33948

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenneth J. Sandstrom* **Kenneth J. Sandstrom** *2/13/04* **539.468.1855**