

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002736

FILED  
Apr 27, 2006  
Secretary of State

**Entity Name:** PINECRAFT SUBDIVISION ASSOCIATION, INC.

**Current Principal Place of Business:**

3434 BAHIA VISTA ST  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

3434 BAHIA VISTA ST  
SARASOTA, FL 34239

**New Mailing Address:**

**FEI Number:** 65-1068208

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIDDELL, JEFFERSON F  
2050 PROCTOR RD  
SARASOTA, FL 34231 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: D ( ) Delete  
Name: SMOKER, BENJAMIN K  
Address: 1552 GOOD AVENUE  
City-St-Zip: SARASOTA, FL 34239

Title: D ( ) Delete  
Name: SMUCKER, SAM  
Address: 1552 GOOD AVENUE  
City-St-Zip: SARASOTA, FL 34239

Title: VD ( ) Delete  
Name: FARMWALD, JOHN  
Address: 1592 GOOD AVE  
City-St-Zip: SARASOTA, FL 34239

Title: D ( ) Delete  
Name: GLICK, ELMER  
Address: 1552 GOOD AVENUE  
City-St-Zip: SARASOTA, FL 34239

Title: ASD ( ) Delete  
Name: GINGERICH, MOSE  
Address: 1552 GOOD AVENUE  
City-St-Zip: SARASOTA, FL 34239

Title: TSD ( ) Delete  
Name: EMRICH, TODD W  
Address: 3434 BAHIA VISTA ST.  
City-St-Zip: SARASOTA, FL 34239

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: TODD W. EMRICH

TSD

04/27/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date