2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# N00000003445

Entity Name: BURNT PINE EAST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

New Mailing Address:

FEI Number: 59-3655313 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORMLEY, TERRY P
215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 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:	DV	( ) Delete
Name:	BOSWELL, JOHNNY	
Address:	10859 EMERALD COAST PKWY 4-360	
City-St-Zip:	MIRAMAR BEACH, FL 32550 US	
Title:	DP	( ) Delete
Name:	GOODMAN, EDDIE	
Address:	3606 PRESERVE LN	
City-St-Zip:	MIRAMAR BEACH, FL 32550 US	
Title:	DS	( ) Delete
Name:	MELODY, JOHN	
Address:	1546 GLEN LAKE CIR	
City-St-Zip:	NICEVILLE, FL 32578 US	
Title:	D	( ) Delete
Name:	RISLEY, HOLLIS	
Address:	8061 FOUNTAINS LN	
City-St-Zip:	MIRAMAR BEACH, FL 32550 US	
Title:	D	( ) Delete
Name:	TABOR, ELLEN	
Address:	3562 PRESERVE LN	
City-St-Zip:	MIRAMAR BEACH, FL 32550 US	
Title:	DT	( ) Delete
Name:	SALMON, ANDY	
Address:	5279 TIVOLI WAY	
City-St-Zip:	MIRAMAR BEACH, FL 32550 US	

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 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: JOHN MELODY S 04/24/2009

Electronic Signature of Signing Officer or Director — Date