

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003646

FILED
Apr 28, 2008
Secretary of State

Entity Name: PINECREST IV AT STONEYBROOK ASSOCIATION, INC.

Current Principal Place of Business:

11691 GATEWAY BLVD.
SUITE 203
FORT MYERS, FL 33913 US

New Principal Place of Business:

Current Mailing Address:

11691 GATEWAY BLVD.
SUITE 203
FORT MYERS, FL 33913 US

New Mailing Address:

FEI Number: 65-1020735 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

S & S GOLF MANAGEMENT, INC.
11691 GATEWAY BLVD.
SUITE 203
FORT MYERS, FL 33913 US

Name and Address of New Registered Agent:

BECKER AND POLIKOFF
14241 METROPOLIS AVENUE, SUITE 100
FORT MYERS, FL 33912 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: KEVIN MILLER

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DST () Delete
Name: SODERQUIST, MARLAIS
Address: 21370 LANCASTER RUN, UNIT 1622
City-St-Zip: ESTERO, FL 33928

Title: DP () Delete
Name: FOELGNER, MARION
Address: 6300 18TH ST NE
City-St-Zip: ST. PETERSBURG, FL 33702

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VPD () Change (X) Addition
Name: PLOURDE, CAROL
Address: 11691 GATEWAY BOULEVARD, SUITE 203
City-St-Zip: FORT MYERS, FL 33913

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: MARION FOELGNER

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date