

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 20, 2006
Secretary of State

DOCUMENT# N00000004341

Entity Name: PINEDALE ESTATES UNIT 4 HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**711 FOXGATE COURT
PLANT CITY, FL 33563**New Principal Place of Business:**1503 SMYRNA PLACE
PLANT CITY, FL 33563**Current Mailing Address:**711 FOXGATE COURT
PLANT CITY, FL 33563**New Mailing Address:**1503 SMYRNA PLACE
PLANT CITY, FL 33563**FEI Number:** 59-3674481**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KLISPIE, JUDY
711 FOX GATE COURT
PLANT CITY, FL 33563 US**Name and Address of New Registered Agent:**WENDT, DONALD M
1503 SMYRNA PLACE
PLANT CITY, FL 33563 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: DONALD M. WENDT

06/20/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: KLISPIE, JUDY
Address: 711 FOX GATE COURT
City-St-Zip: PLANT CITY, FL 33563**Title:** VPD () Delete
Name: PEREZ, TONYA
Address: 1505 SU VRNA
City-St-Zip: PLANT CITY, FL 33563**Title:** TD () Delete
Name: BRWER, CHNICTOPRIER J
Address: 1501 TORIZON PLOW
City-St-Zip: PLANT CITY, FL 35563**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: WENDT, DONALD M
Address: 1503 SMYRNA PLACE
City-St-Zip: PLANT CITY, FL 33563**Title:** VPD (X) Change () Addition
Name: PEREZ, TONYA
Address: 1505 SMYRNA PLACE
City-St-Zip: PLANT CITY, FL 33563**Title:** TD (X) Change () Addition
Name: BENDER, CHRISTOPHER J
Address: 1501 TOZIER PLACE
City-St-Zip: PLANT CITY, FL 35563**Title:** SECY () Change (X) Addition
Name: WENDT, VALERIE L
Address: 1503 SMYRNA PLACE
City-St-Zip: PLANT CITY, FL 33563

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: DONALD M. WENDT

PD

06/20/2006

Electronic Signature of Signing Officer or Director

Date