

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00047

**FILED**  
**Jan 10, 2011**  
**Secretary of State**

**Entity Name:** PINETREE VILLAGE II CONDOMINIUM ASSOCIATION OF VERO BEACH, INC.

**Current Principal Place of Business:**

1801 INDIAN RIVER BOULEVARD  
VERO BEACH, FL 32960

**New Principal Place of Business:**

**Current Mailing Address:**

1801 INDIAN RIVER BOULEVARD  
VERO BEACH, FL 32960

**New Mailing Address:**

**FEI Number:** 59-2744036

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRACI, ANN  
1801 INDIAN RIVER BLVD B-5  
VERO BEACH, FL 32960 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  
Name: FAZZARI, VICTOR  
Address: 1801 INDIAN RIVER BLVD C-5  
City-St-Zip: VERO BEACH, FL 32960

Title: P  
Name: GRACI, ANN  
Address: 1801 INDIAN RIVER BLVD B-5  
City-St-Zip: VERO BEACH, FL 32960

Title: T/S  
Name: KLINE, SHEILA  
Address: 1801 INDIAN RIVER BLVD C-4  
City-St-Zip: VERO BEACH, FL 32960

Title: VP  
Name: MUTH, DONNA  
Address: 1801 INDIAN RIVER BLVD C-6  
City-St-Zip: VERO BEACH, FL 32960

I hereby 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 all other like empowered.

SIGNATURE: ANN GRACI

P

01/10/2011

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

\_\_\_\_\_  
Date