2003 NOT-FOR-PROFIT CORPORATION

Mailing Address 3140 N. TURKEY OAK DR.

3. Mailing Address

City & State

Zip

CRYSTAL RIVER FL 34428

Suite, Apt. #, etc.

UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N00630 PINEWOOD HOMEOWNERS ASSOCIATION OF CRYSTAL RIVI

, INC.

Principal Place of Business

2. Principal Place of Business

Country

6. Name and Address of Current Registered Agent

3140 N. TURKEY OAK DR. **CRYSTAL RIVER FL 34428**

Suite, Apt. #, etc.

FRANK, DONNA 8155 W WOODBURY CT

City & State

Zip

FILED May 07, 2003 8:00 am Secretary of State

ER		05-07-2003 90156 020 **					
		CHECK HERE IF MAKING CHAI					
••		4. FEI Number 59-2361031	Applied For Not Applicable				
Country			\$8.75 Additional Fee Required				
	7. Name and Address of New Registered Agent						
	Name	. 3.3					
	Street Address (P.O. Box Number is Not Acceptable)						
	City	FL Zij	p Code				

CRYSTAL RIVER FL 34428							
			City		F	Zip Code	e .
	named entity submits this statement for the purpo- tions of registered agent.	se of changing its re	gistered office o	r registered agent, or both, in th			and accept
SIGNATURE	Jonna trans				4.28	<u> </u>	
	Signature, typed or printed name of registered agent and title if appli	cable. (NOTE: R	egistered Agent signat	ure required when reinstating)	DAT	TΕ	
FILE NOW: FEE IS \$61.25		Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES	TO OFFICERS AND	DIRECTORS IN	10
TITLE ** NAME : STREET AODRESS	PD Frank, Donna 8155 w Woodbury CT	Delete .	NAME STREET ADDRESS			☐ Change	☐ Addition _
CITY-ST-ZIP	CRYSTAL RIVER FL 34428	<u></u>	CITY-ST-ZIP				
TITLE NAME STREET ADDRESS	TD Curtis, ED 8234 W Fairoaks CT	🔀 Delete	TITLE NAME STREET ADDRESS	Douglas Frank 8155 W. Woodby	K WY CT.	⊠ Change	☐ Addition
CITY-ST-ZIP	CRYSTAL RIVER FL 34428		CITY-ST-ZIP	Crystal River.F	134428		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MILLS, CANDICE. 8234 W FAIROAKS CT CRYSTAL RIVER FL 34428	€) Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Larry Whitne 8170 W. Wood Crystal River,		Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CARROLL, TRACY 8170 W WOODBURY CT CRYSTAL RIVER FL 34428	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD SZEWCZUK, PHILIP 8205 W WOODBURY CT CRYSTAL RIVER FL 34428	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MD SURIS, JOSE 8231 W WOODBURY CT CRYSTAL RIVER FL 34428 Pertify that the information supplied with this filling of	□ Delete	THTLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CR2E037 (10/02)