


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 28, 2008 8:00 am**  
**Secretary of State**

03-28-2008 90026 047 \*\*\*\*61.25

**DOCUMENT # N0100000529**

1. Entity Name  
**VILLAGES OF PINE ISLAND PROPERTY OWNER'S ASSOCIATION, INC.**



Principal Place of Business <b>600 FIFTH AVE SOUTH          SUITE 207          NAPLES, FL 34102</b>	Mailing Address <b>600 FIFTH AVE SOUTH          SUITE 207          NAPLES, FL 34102</b>
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**DO NOT WRITE IN THIS SPACE**



03162008 No Chg-NP CR2E037 (4/06)

4. FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**BRUGGER, JOHN N  
 600 FIFTH AVE SOUTH  
 SUITE 207  
 NAPLES, FL 34102**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRUGGER, JOHN N 600 FIFTH AVE S., STE 207 NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMEJA, ROBERT B 600 FIFTH AVE S., STE 207 NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMEJA, BONNIE 600 FIFTH AVE S., STE 207 NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Bonnie Smeja* 3-25-08