

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006622

FILED
Aug 21, 2008
Secretary of State

Entity Name: PINE ISLAND TROPICAL HOMESITES TROPICAL POINT CANAL AND BOAT RAMP ASSOCIATION, INC.

Current Principal Place of Business:

3437 TANGERINE DR
ST JAMES CITY, FL 33956

New Principal Place of Business:

Current Mailing Address:

3437 TANGERINE DR
ST JAMES CITY, FL 33956

New Mailing Address:

FEI Number: 32-0051295 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PENOYER, ROSALIE
3437 TANGERINE DR
ST JAMES CITY, FL 33956 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 () Delete
Name: PENOYER, ROSALIE
Address: 3437 TANGERINE DR.
City-St-Zip: ST. JAMES CITY, FL 33956

Title: D () Delete
Name: PAPER, MISTY R
Address: 3436 TANGERINE DR.
City-St-Zip: ST. JAMES CITY, FL 33956

Title: D () Delete
Name: WAGGLE, JOHAN G
Address: 3836 TROPICAL POINT DR.
City-St-Zip: ST. JAMES CITY, FL 33956

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ROSALIE PENOYER

D

08/21/2008

Electronic Signature of Signing Officer or Director

Date