

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01184

FILED
Feb 02, 2009
Secretary of State

Entity Name: BIG PINE WAY MAINTENANCE ORGANIZATION, INC.

Current Principal Place of Business:

PINEBROOK LAKES
BIG PINE WAY
FT. MYERS, FL 33907 US

New Principal Place of Business:

Current Mailing Address:

12734 KENWOOD LANE SW
SUITE # 9 ATT KIMBERLY A. PROBE
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 59-2451864 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONDOMINIUM FINANCIAL SERVICES
C/O J. REPERT
13131 KINGS PT DR #11A
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

PROBE PROBE & CO., P.A.
12734 KENWOOD LANE
SUITE 9
FORT MYERS, FL 33907 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: KIMBERLY A. PROBE

02/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ATRAYCIK, VIRGINA
Address: 13076 TALL PINE CIR
City-St-Zip: FORT MYERS, FL 33907

Title: S () Delete
Name: FOSTER, PATE J
Address: 5499 NARBOUR CAS TLE DR.
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: DEVORE, BARBARA
Address: 5474 GOVERNORS DR
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: LIUINCSTON, WILLIAM
Address: 118 PINEBROOK DR.
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TRAYCIK, VIRGINA
Address: 13076 TALL PINE CIR
City-St-Zip: FORT MYERS, FL 33907

Title: S (X) Change () Addition
Name: PORTER, JAN
Address: 5401 HARBOUR CASTLE DR.
City-St-Zip: FORT MYERS, FL 33907

Title: VP/T (X) Change () Addition
Name: DEVORE, BARBARA
Address: 5474 GOVERNORS DR
City-St-Zip: FORT MYERS, FL 33907

Title: D (X) Change () Addition
Name: LIVINGSTON, WILLIAM
Address: 118 PINEBROOK DR.
City-St-Zip: FORT MYERS, FL 33907

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: VIRGINIA TRAYCIK

P

02/02/2009

Electronic Signature of Signing Officer or Director

Date