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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 01, 1999 8:00 am § Secretary of State

03-01-1999 90119 021 ****61.25

DOCUMENT # NO1330

1. Corporation Name

PINEBROOK WOODS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business 12650 WHITEHALL DR. FORT MYERS FL 33907

HS

Mailing Address

C/O BENSON'S. INC. 12650 WHITEHALL DR. FORT MYERS FL 33907

2. Principal Place of Business AVC 2a. Mailing Address 21 13 300-56 S. CLEVELAND 26 13300-56 CLEVE	3. Date Incorporated or Qualifed
21 13300-56 S. CLEVELAND 26 13300-56 CLEVE	1 nno 1902 02/09/1984
22 SUITE 258 27 SUITE 258	59-2494036 Not Applicable
City & State City & State	S FL 5. Certificate of Status Desired Fee Required
23 / 010 / / / 20 /	
Zip Country Zip Cou	The Electron Sumparism of the Control of the Contro
24 33907 25 VS 29 33907 30	V S Trust Fund Contribution Added to Fees
Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
	81 Name JOSEPH DEBRUCKY
BENSON, MARK R 12650 WHITEHALL DR.	82 Street Address (P.O. Box Number is Not Acceptable) 13 2 0 3 TALL PINE CIRCLE
FT MYERS FL 33907	83
	84 City FI 85 Zip Code 32907

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

JUSEPH DEBRUCKY Ignature, typed or printed name of registered agent and title if applicable PRESIDENT SIGNATURE (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE 1.1 TITLE TITLE PD JUSEPH DEBRUCKY MISSALL, ELISE 1.2 NAME 13203 TALL PINE NAME CIRCLE 13163 TALL PINE CR. 1.3 STREET ADORESS STREET ADDRESS FL FURT MYERS 3*3 9 07* FT. MYERS FL 33907 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE VO TITLE GLEN GREEN 2.2 NAME PEIFFER, ANNE NAME CIRCLIS 13160 TALL 13200 TALL PINE CR. 2.3 STREET ADORESS STREET ADORESS 33907 FORT MYENS 2.4 CITY-ST-ZIP FT. MYERS FL 33907 CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE KARREN BR BRYSON 3.2 NAME HESEL, INGEGERO NAME CIRCLE 13104 TALL PINE CR 3.3 STREET ADDRESS STREET ADDRES 33 907 FORT MYERS FT. MYERS FL 33907 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE TD ROBERT AUER 4, 2 NAME ORISTANO, PATRICIA NAME 13172 TALL PINE CIRCLY FORT MYERS FL 33 4.3 STREET ADDRESS 13268 TALL PINE CR. STREET ADDRESS 33907 FT. MYERS FL 33907 4.4 CITY-\$T-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE ם TITLE O'PHELAN MARY LOU 5.2 NAME DARCIS, JEAN-PAUL NAME CIRCLO TALL 13 23 2 5.3 STREET ADDRESS 13036 TALL PINE CR STREET ADDRESS 33907 5.4 CITY-ST-ZIP FT MYERS FL 33907 CITY-ST-ZIP Addition □ DELETE 6.1 TITLE ☐ Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTIGIA WERE TREASURED

Men 1/25/99 941/590-902,

CR2E037 (11/98)