


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2005 8:00 am**  
**Secretary of State**

04-26-2005 90137 020 \*\*\*\*61.25

|  |  |  |   |   |  |
|--|--|--|---|---|--|
| <b>DOCUMENT # N02000002672</b>   |  |  |   |  |  |
| <b>1. Entity Name</b><br>PINES TRAILER PARK HOMEOWNERS ASSOCIATION, INC.   |  |  |   |   |  |
| <b>Principal Place of Business</b><br>240 S. PINEAPPLE AVE.<br>SARASOTA, FL 34236  |  |  | <b>Mailing Address</b><br>240 S. PINEAPPLE AVE.<br>SARASOTA, FL 34236 |   |  |
| <b>2. Principal Place of Business</b>  |  | <b>3. Mailing Address</b>                                      |   |   |  |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.  |   |   |  |
| City & State   |  | City & State   |   |   |  |
| Zip  | Country                                    | Zip  | Country   | <b>4. FEI Number</b><br>54-2103680  |  |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/>   |  |  |   | <b>\$8.75 Additional Fee Required</b>   |  |
| <b>6. Name and Address of Current Registered Agent</b>   |  |  | <b>7. Name and Address of New Registered Agent</b>                    |   |  |
| GORDON, SCOTT E<br>240 S. PINEAPPLE AVE.<br>SARASOTA, FL 34236   |  |  | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City    |   |  |
| FL   |  |  | Zip Code  |   |  |
| <b>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.</b>   |  |  |   |   |  |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)   |  |  |   |   |  |
| <b>Filing Fee is \$61.25 Due by May 1, 2005</b>  |  | <b>9. Election Campaign Financing</b> <input type="checkbox"/> |   | <b>\$5.00 May Be Added to Fees</b>  |  |
| <b>Make check payable to Florida Department of State</b>   |  | <b>10. OFFICERS AND DIRECTORS</b>                              |   |   |  |
| <b>TITLE</b><br>SD<br>NAME<br>PARKS, CARL L<br>STREET ADDRESS<br>70 MIDGE CT.<br>CITY-ST-ZIP<br>BRADENTON, FL 34217  | <input type="checkbox"/> Delete            |  |   |   |  |
| <b>TITLE</b><br>D<br>NAME<br><del>DRESCHER, CONNIE</del><br>STREET ADDRESS<br><del>40 BAY CT.</del><br>CITY-ST-ZIP<br><del>BRADENTON, FL 34217</del>   | <input checked="" type="checkbox"/> Delete |  |   |   |  |
| <b>TITLE</b><br>D<br>NAME<br>DAWSON, JOHN<br>STREET ADDRESS<br>6814 18 AVE W<br>CITY-ST-ZIP<br>BRADENTON, FL 34209   | <input type="checkbox"/> Delete            |  |   |   |  |
| <b>TITLE</b><br>P<br>NAME<br><del>GUEST, DAVE</del><br>STREET ADDRESS<br><del>1146 SOUTH COUNTRY CLUB DR</del><br>CITY-ST-ZIP<br><del>NISKAYUNA, NY 12099</del>  | <input checked="" type="checkbox"/> Delete |  |   |   |  |
| <b>TITLE</b><br>T<br>NAME<br>BARTELT, ROBERT<br>STREET ADDRESS<br>760 LONGBOAT CT<br>CITY-ST-ZIP<br>LONGBOAT KEY, FL 34228   | <input type="checkbox"/> Delete            |  |   |   |  |
| <b>TITLE</b><br>V<br>NAME<br>WORTMAN, BONA<br>STREET ADDRESS<br>147 PLUM ST<br>CITY-ST-ZIP<br>CHILLICOTHE, OH 45601  | <input type="checkbox"/> Delete            |  |   |   |  |
| <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>   |  |  |   |   |  |
| <b>President:</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>Ed Cavazos,<br>1247 West End NW,<br>Grand Rapids, MI 49504   |  |  |   |   |  |
| <b>Director:</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>Jim Kochensparger<br>670 Shore Drive<br>Columbus, OH 43299   |  |  |   |   |  |
| <b>Director:</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>Eileen Suhre<br>3715 Saints Court<br>Colorado Springs, CO 80904  |  |  |   |   |  |
| <b>Director:</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition<br>Larry Kuzenko<br>2325 Bay Woods Ct.<br>Bay City, MI 48706   |  |  |   |   |  |
| <b>Director:</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>Robert McClannan,<br>64 Bay Drive North<br>Bradenton Beach, FL 34217   |  |  |   |   |  |
| <b>12. 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 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.</b> |  |  |   |   |  |
| <b>SIGNATURE:</b> <i>Carl L. Parks</i> , April 8, 2005 941-778-4820  |  |  |   |   |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   |  |  |   |   |  |