2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007571

Entity Name: PINES WEST CAMERA CLUB, INC

FILED Apr 27, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place o	New Principal Place of Business:	
MIAMI HERLD OFFICE BUILDING 2010 NW 150TH PEMBROKE PINES, FL 33026			
Current Mailing Address:	New Mailing Address	:	
521 N 70TH WAY HOLLYWOOD, FL 33024			
FEI Number: 20-2466858 FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:		
FREDERICH, JUDITH 13901 SW 22 PL DAVIE, FL 33325 US			
The above named entity submits this statement for the purp in the State of Florida.	ose of changing its registered	office or registered agent, or both,	
SIGNATURE:			
Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: P () Delete Name: FEREDERICH, JUDITH Address: 13901 SW 22 PL City-St-Zip: DAVIE, FL 33325	Title: P (Name: BOJER, TED Address: 5110 CLEVEI City-St-Zip: HOLLYWOOI		

 Title:
 VP
 () Delete

 Name:
 KLENETSKY, MICHAEL

 Address:
 9350 NW 18 DR

 City-St-Zip:
 PLANTATION, FL 33322

Title: SEC () Delete

 Name:
 MOURRA, CARLINE

 Address:
 19407 NW 13TH STREET

 City-St-Zip:
 PWMBROKE PINES, FL 33029

Title: T () Delete Name: WALTER, ANN

 Name:
 WALTER, ANN

 Address:
 17766 SW 23 ST

 City-St-Zip:
 MIRAMAR, FL 33029

Title: VP () Delete Name: SCHWARTZ, GARY

Address: 971 WINDWARD WAY
City-St-Zip: WESTON, FL 33327

City-St-Zip:

ROWE, ELAINE

19905 SW 5TH COURT

PEMBROKE PINES, FL 33029

(X) Change () Addition

() Change () Addition

() Change () Addition

Title: Name: Address: City-St-Zip:

Title:

Title:

Name:

Address:

Name:

Address:

City-St-Zip:

Title: VP (X) Change () Addition

Name: DOMINGUEZ, JOSE Address: 13000 SW 15 CT.

City-St-Zip: PEMBROKE PINES, FL 33027

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: TED BOJER P 04/27/2008