

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001551

FILED
Jan 28, 2011
Secretary of State

Entity Name: YOUNG PINE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

HOUSE OF MANAGEMENT ENTERPRISES FOR COMMUN
5756 S. SEMORAN BLVD.
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

HOUSE OF MANGEMENT ENTERPRISES FOR COMMUN
5756 S. SEMORAN BLVD.
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 56-2452732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOUSE OF MANAGEMENT ENTERPRISES FOR
COMMUNITY ASSOCIATIONS, INC.
5756 S. SEMORAN BLVD.
ORLANDO, FL 32822 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: PD
Name: WILSON, GARRETT
Address: 3408 BENSON PARK BLVD
City-St-Zip: ORLANDO, FL 32829 US

Title: VD
Name: NEVIASER, KRISTINE M
Address: 3954 BENSON PARK BLVD
City-St-Zip: ORLANDO, FL 32829 US

Title: TD
Name: SMITH, PERRY
Address: 3937 BENSON PARK BLVD
City-St-Zip: ORLANDO, FL 32829

Title: D
Name: LUBRIDO, CHARLES
Address: 3481 BENSON PARK BLVD
City-St-Zip: ORLANDO, FL 32829

I hereby 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 all other like empowered.

SIGNATURE: TARA SKILES

LCAM

01/28/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date