

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005444

FILED
Apr 06, 2005
Secretary of State

Entity Name: PINECREST MOBILE HOME PARK LOT RENTERS ASSOCIATION, INC.

Current Principal Place of Business:

6012 HARRIET STREET
ZEPHRYHILLS, FL 33542

New Principal Place of Business:

Current Mailing Address:

6012 HARRIET STREET
ZEPHRYHILLS, FL 33542

New Mailing Address:

FEI Number: 20-1898210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BENJAMIN, ROBERT
6012 HARRIET STREET
ZEPHRYHILLS, FL 33542 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: D () Delete
Name: BENJAMIN, ROBERT H
Address: 6012 HARRIET STREET
City-St-Zip: ZEPHRYHILLS, FL 33542

Title: D () Delete
Name: BENJAMIN, MARGARET A
Address: 6012 HARRIET STREET
City-St-Zip: ZEPHRYHILLS, FL 33542

Title: D () Delete
Name: SHROEDER, JACK
Address: 6012 HARRIET STREET
City-St-Zip: ZEPHRYHILLS, FL 33542

Title: D () Delete
Name: DROUILLARD, NELSON
Address: 6012 HARRIET STREET
City-St-Zip: ZEPHRYHILLS, FL 33542

Title: D () Delete
Name: DROUILLARD, J.P.
Address: 6012 HARRIET STREET
City-St-Zip: ZEPHRYHILLS, FL 33542

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DEYOE, JOYCE
Address: 6043 MINERVA STREET
City-St-Zip: ZEPHRYHILLS, FL 33542

Title: D (X) Change () Addition
Name: SHROEDER, JACK
Address: 6010 HARRIET STREET
City-St-Zip: ZEPHRYHILLS, FL 33542

Title: D (X) Change () Addition
Name: DROUILLARD, NELSON
Address: 6122 HARRIET STREET
City-St-Zip: ZEPHRYHILLS, FL 33542

Title: D (X) Change () Addition
Name: DROUILLARD, J.P.
Address: 6119 HARRIET STREET
City-St-Zip: ZEPHRYHILLS, FL 33542

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT H. BENJAMIN

D

04/06/2005

Electronic Signature of Signing Officer or Director

Date