# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 03, 2009**
**Secretary of State**

DOCUMENT# N05000003289

**Entity Name:** PINE KEY RESERVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3281 NW 118TH DR
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

296 NE SURFSIDE AVE
PORT SAINT LUCIE, FL 34983

**Current Mailing Address:**

3281 NW 118TH DR
CORAL SPRINGS, FL 33065

**New Mailing Address:**

296 NE SURFSIDE AVE
PORT SAINT LUCIE, FL 34983

**FEI Number: 20-0625233** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BHOME PROPERTY MANAGEMENT INC.
3281 NW 118TH DR
CORAL SPRINGS, FL 33065 US

**Name and Address of New Registered Agent:**

BHOME PROPERTY MANAGEMENT INC.
296 NE SURFSIDE AVE
PORT SAINT LUCIE, FL 34983 US

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: VERA FERNANDEZ 02/03/2009
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: PRESTON, JENNEI
Address: 6274 S. MILTARY TRAIL #303
City-St-Zip: LAKE WORTH, FL 33463

Title: T ( ) Delete
Name: PRESTON, BRIAN
Address: 6274 SOUTH MILITARY TRAIL #303
City-St-Zip: LAKE WORTH, FL 33463

Title: VP (X) Delete
Name: CARABELAS, NUBIA
Address: 6274 SOUTH MILITARY TRAIL
City-St-Zip: LAKE WORTH, FL 33463

Title: D ( ) Delete
Name: RIBECK, MARTIN
Address: 6274 SOUTH MILITARY TRAIL
City-St-Zip: LAKE WORTH, FL 33463

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: VP (X) Change ( ) Addition
Name: RIBECK, MARTIN
Address: 6274 SOUTH MILITARY TRAIL
City-St-Zip: LAKE WORTH, FL 33463

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: VERA FERNANDEZ MANA 02/03/2009
Electronic Signature of Signing Officer or Director Date