## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000012123

FILED Mar 22, 2010 Secretary of State

Entity Name: PINE RIDGE TOWNHOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

475 W. TOWN PLACE 475 W. TOWN PLACE

#100 #200

SAINT AUGUSTINE, FL 32092 SAINT AUGUSTINE, FL 32092

Current Mailing Address: New Mailing Address:

475 W. TOWN PLACE 475 W. TOWN PLACE

#100 #200

SAINT AUGUSTINE, FL 32092 SAINT AUGUSTINE, FL 32092

FEI Number: 86-1162943 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SEVERN TRENT SERVICES

475 WEST TOWN PLACE

475 WEST TOWN PLACE

STE 100 STE 200

SAINT AUGUSTINE, FL 32092 US SAINT AUGUSTINE, FL 32092 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: 03/22/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: CHAPMAN, ANJEL P
Address: 6411 SHORTLEAF PLACE
City-St-Zip: JACKSONVILLE, FL 32244

Title: VP

Name: BROWER, DONALD
Address: 6421 SHORTLEAF PLACE
City-St-Zip: JACKSONVILLE, FL 32244

Title: S/T

 Name:
 GREGSON, TERESA

 Address:
 5906 BRICE COURT

 City-St-Zip:
 JACKSONVILLE, FL 32244

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: ANJEL CHAPMAN PRES 03/22/2010