2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06279

FILED Mar 29, 2009 Secretary of State

Entity Name: PINE FOREST MOBILE HOME OWNERS ASSOCIATION, INC.

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

76 GARDENIA COURT

ORANGE CITY, FL 32763 US

Current Mailing Address: New Mailing Address:

76 GARDENIA COURT

ORANGE CITY, FL 32763 US

FEI Number: 59-2522548 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:

CLARK, WILLIAM M

WILSON, RON C 91 WESTLAKE DR 157 WESTLAKE COURT

ORANGE CITY, FL 32763 US US ORANGE CITY, FL 32763

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: RON C. WILSON 03/29/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

CLARK, WILLIAM M WILSON, RON C Name: Name: 91 WESTLAKE DR Address: 157 WESTLAKE DRIVE Address: ORANGE CITY, FL 32763 City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip:

Title: PD Title: (X) Change () Addition () Delete

WILSON, RON Name: SCHMITT, JIM Name: Address: 157WESTLAKE DR Address: 4 WESTLAKE DRIVE City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip: ORANGE CITY, FL 32763

Title: () Delete Title: (X) Change () Addition VAN WORMER, DAVID (BILL) VAN WORMER, DAVID (BILL) Name: Name:

Address: 25 WESTLAKE CT Address: 25 WESTLAKE CT City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip: ORANGE CITY, FL 32763

Title: () Delete Title: () Change () Addition

GUY, HOWARD R Name: Name: 381 TRAFFORD AVE Address: Address: City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

DAMRON, ROGER O'HARA, MIKE Name: Name: 46 WESTLAKE DR 53 WESTLAKE DRIVE Address: Address: City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip: ORANGE CITY, FL 32763

Title: () Delete Title: (X) Change () Addition

LACOSTE, HELEN KASTER, CLARA Name: Name: Address: 32 WESTLAKE DR Address: 30 WESTLAKE DR ORANGE CITY, FL 32763 ORANGE CITY, FL 32763 City-St-Zip: City-St-Zip:

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: RON C. WILSON **PRES** 03/29/2009