

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 15, 2011
Secretary of State

DOCUMENT# N08078

Entity Name: PINE RIDGE AT MARTIN DOWNS VILLAGE I CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1545 SW SILVER PINE WAY
PALM CITY, FL 34991**New Principal Place of Business:****Current Mailing Address:**PO BOX 946
PALM CITY, FL 34990**New Mailing Address:****FEI Number:** 59-2534819**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROSS, EARLE, & BONAN, P.A.
789 S FEDERAL HIGHWAY
SUITE 101
STUART, FL 34994 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: VP
Name: RAMSEY, CYNTHIA
Address: 2114 SW SILVER PINE WAY #C1
City-St-Zip: PALM CITY, FL 34991

Title: T
Name: SACCO, JIM
Address: 2762 SW MATHESON AVE. H-1
City-St-Zip: PALM CITY, FL 34991

Title: PRE
Name: GUZZI, ROLAND
Address: 1635 SE SILVER PINE WAY B-2
City-St-Zip: PALM CITY, FL 34991

Title: DIR
Name: SMITH, DOROTHY
Address: 2763 SW MATHESON AVE. #A
City-St-Zip: PALM CITY, FL 34991

Title: S
Name: BOBB, FRED
Address: 1484 SW SILVER PINE WAY UNIT E
City-St-Zip: PALM CITY, FL 34991

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: SUZIE BUTLER

MS.

08/15/2011

Electronic Signature of Signing Officer or Director

Date