2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08724

FILED May 11, 2009 Secretary of State

Entity Name: THE COLONIAL PINES HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

COLONIAL PINES MOBILE PARK ASSC.

COLONIAL PINES MOBILE APRK ASSC.

2101 COLONIAL AVE

2101 COLONIAL AVE NAVARRE, FL 32566

NAVARRE, FL 32566

Current Mailing Address:

New Mailing Address:

2101 COLONIAL AVE NAVARRE, FL 32566

FEI Number: 59-3619247

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ABEL, JUDITH

9850 W BUNKER HILL CIRCLE NAVARRE, FL 32566

MARTIN, EDWARD T 9876 E. CONCORD CIRCLE

NAVARRE, FL 32566

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: E. THOMAS MARTIN

05/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete

MARTIN, THOMAS Name: 9876 E. CONCORD CIR. Address:

City-St-Zip: NAVARRE, FL 32566

Title: V/P () Delete COLEY, ALBERT Name:

Address: 2115 MUSKET DR. City-St-Zip: NAVARRE, FL 32566

Title: () Delete GARRETT, PAT Name:

2142 COLONIAL AVE Address: City-St-Zip: NAVARRE, FL 32566

Title: () Delete Name: BENDUS, BETTY

9874 E CONCORD CIR Address: City-St-Zip: NAVARRE, FL 32566

(X) Change () Addition

COX, CARLTON P Name:

Address: 9855 W. CONCORD CIRCLE

City-St-Zip: NAVARRE, FL 32566

Title: (X) Change () Addition

Name: DEWALL, JANE Address: 2115 COLONIAL AVE. City-St-Zip: NAVARRE, FL 32566

Title: (X) Change () Addition

TOOTHMAN, LINDA Name: 9860 BRANDYWINE DR. Address: City-St-Zip: NAVARRE, FL 32566

Title: (X) Change () Addition

Name: MARTIN, THOMAS 9876 E CONCORD CIR Address: City-St-Zip: NAVARRE, FL 32566

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: EDWARD T MARTIN Т 05/11/2009