

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003224

FILED
Feb 19, 2011
Secretary of State

Entity Name: PINE GROVE PARK COMMUNITY CLUB INC

Current Principal Place of Business:

6289 CENTRAL AVE
ST. CLOUD, FL 34771

New Principal Place of Business:

Current Mailing Address:

1655 HADDOCK ST
ST. CLOUD, FL 34771

New Mailing Address:

FEI Number: 59-1005070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KERSHNER, TOM
6289 CENTRAL AVE
ST. CLOUD, FL 34771 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: PRES
Name: KERSHNER, TOM
Address: 6289 CENTRAL AVE
City-St-Zip: ST. CLOUD, FL 34771

Title: VP
Name: HANLEY, SHARON
Address: 6289 CENTRAL AVE
City-St-Zip: ST. CLOUD, FL 34771

Title: SEC
Name: MATTINGLY, BRENDA
Address: 6289 CENTRAL AVE
City-St-Zip: ST. CLOUD, FL 34771

Title: TREA
Name: TUCKER, BEVERLY
Address: 6289 CENTRAL AVE
City-St-Zip: ST. CLOUD, FL 34771

Title: MEMB
Name: SHREVE, LILLIAN
Address: 6289 CENTRAL AVE
City-St-Zip: ST. CLOUD, FL 34771

Title: MEMB
Name: LOCEY, KENNETH
Address: 6289 CENTRAL AVE
City-St-Zip: ST. CLOUD, FL 34771

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: TOM KERSHNER

PRES

02/19/2011

Electronic Signature of Signing Officer or Director

Date