

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000009215

**FILED**  
**Jul 30, 2012**  
**Secretary of State**

**Entity Name:** PINE HILLS COMMUNITY DEVELOPMENT CORPORATION

**Current Principal Place of Business:**

6219 GAMBLE DRIVE  
ORLANDO, FL 32808

**New Principal Place of Business:**

**Current Mailing Address:**

6219 GAMBLE DRIVE  
ORLANDO, FL 32808

**New Mailing Address:**

**FEI Number:** 27-3630822

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOGLE, DELANO  
6219 GAMBLE DRIVE  
ORLANDO, FL 32808 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:** EX.D  
**Name:** BOGLE, DELANO  
**Address:** 6219 GAMBLE DRIVE  
**City-St-Zip:** ORLANDO, FL 32808

**Title:** DIR.  
**Name:** KIMBROUGH, MICHAEL  
**Address:** 111 LAUREL RIDGE AVE  
**City-St-Zip:** OCOEE, FL 34761

**Title:** DIR.  
**Name:** ANTONE, BRUCE  
**Address:** 8627 SHENNA COURT  
**City-St-Zip:** ORLANDO, FL 32818

**Title:** DIR.  
**Name:** BROWN, BARRINGTON  
**Address:** 3715 TRIANON DRIVE  
**City-St-Zip:** ORLANDO, FL 32818

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:** DELANO BOGLE

EX.D

07/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date