

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10601

FILED  
May 16, 2005  
Secretary of State

**Entity Name:** BLUE PINE VILLAGE OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

113 ELDERBERRY LN  
NICEVILLE, FL 32578 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5026 BWB  
NICEVILLE, FL 325782026

**New Mailing Address:**

**FEI Number:** 59-2571310 **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:**

CONEAU, RON  
110 MIDLAND CRT  
NICEVILLE, FL 32578 US

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

CONEAU, RON  
110 MIDLAND CRT  
NICEVILLE, FL 32578 US

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 COMEAU

05/16/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CONEAU, RON  
Address: 110 MIDLAND CRT  
City-St-Zip: NICEVILLE, FL 32578

Title: V ( ) Delete  
Name: LOUIS, CARTER  
Address: 122 MEADOW BROOK COURT  
City-St-Zip: NICEVILLE, FL 32578

Title: TD ( ) Delete  
Name: ROLFE, JOANN  
Address: 1547 MEADOWBROOK CT.  
City-St-Zip: NICEVILLE, FL 32578

Title: D ( ) Delete  
Name: BRIDGES, SUSAN  
Address: 111 MIDLAND CRT  
City-St-Zip: NICEVILLE, FL 32578

Title: DC ( ) Delete  
Name: SEDA, BEN  
Address: 1560 MEADOW BROOK COURT  
City-St-Zip: NICEVILLE, FL 32578

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CONEAU, RON  
Address: 110 MIDLAND CRT  
City-St-Zip: NICEVILLE, FL 32578

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 COMEAU

PD

05/16/2005

Electronic Signature of Signing Officer or Director

Date