

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2009
Secretary of State

DOCUMENT# N11074

Entity Name: LUNA PINES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1464 SILVER PINE LANE
C/O ERIC J. MITCHEM
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

Current Mailing Address:

1464 SILVER PINE LANE
C/O ERIC J. MITCHEM
TALLAHASSEE, FL 32312 US

New Mailing Address:

FEI Number: 59-2877988 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

MITCHEM, ERIC
1464 SILVER PINE LANE
TALLAHASSEE, FL 32312 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: P () Delete
Name: DUNCAN, WILLIAM
Address: 1398 SILVER PINE
City-St-Zip: TALLAHASSEE, FL 32312

Title: VP () Delete
Name: BEEMAN, DAN
Address: 1421 FERZON WAY
City-St-Zip: TALLAHASSEE, FL 32312

Title: T () Delete
Name: MITCHEM, ERIC J
Address: 1464 SILVER PINE LANE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: EASTON, GARTH
Address: 9723 BILL HEADLEY RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: S () Delete
Name: HARMAN, VICKY
Address: 1421 SILVER PINE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D () Delete
Name: HARMAN, PAUL
Address: 1421 SILVER PINE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 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: ERIC J. MITCHEM

DR.

05/09/2009

Electronic Signature of Signing Officer or Director

_____ Date