

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23002

FILED
Feb 13, 2009
Secretary of State

Entity Name: PINE MANOR IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 061464
FT. MYERS, FL 339068464

New Principal Place of Business:

5547 10TH AVENUE
FT. MYERS, FL 33907

Current Mailing Address:

P.O. BOX 61464
FT MYERS, FL 33906 US

New Mailing Address:

FEI Number: 65-0133208 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KNIGHT, LOIS
5508 SAGO AVE.
FORT MYERS, FL 33907 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: TD () Delete
Name: GOMEZ, ANNE
Address: 5554 FIFTH AVE
City-St-Zip: FT. MYERS, FL 33907

Title: SD () Delete
Name: BOPP, RICHARD T
Address: 8707 EXETER ST
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: EILERTSON, MARY F.
Address: 5553 8TH AVENUE
City-St-Zip: FT. MYERS, FL

Title: VPD () Delete
Name: FORTIN, JULIA
Address: 5451 THIRD AVE
City-St-Zip: FORT MYERS, FL 33906

Title: PD (X) Delete
Name: LANE, STEPHEN H JR
Address: 215 FAIRVIEW AVE
City-St-Zip: FORT MYERS, FL 33905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: GOMEZ, ANNE TREASUR
Address: 5554 FIFTH AVE
City-St-Zip: FT. MYERS, FL 33907

Title: PD (X) Change () Addition
Name: PARILLA, TOMMY PRESIDE
Address: 2517 9TH STREET WEST
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VPD (X) Change () Addition
Name: MIKE, MILLER VICE
Address: 4044 CHERRYBROOK LOOP
City-St-Zip: FT. MYERS, FL 33966

Title: D (X) Change () Addition
Name: ZUMBACH, TRISCHA
Address: 5429 8TH AVENUE
City-St-Zip: FORT MYERS, FL 33907

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: TRISCHA ZUMBACH

D

02/13/2009

Electronic Signature of Signing Officer or Director

Date