

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25532

**FILED**  
**Feb 13, 2004**  
**Secretary of State****Entity Name:** BIG PINE ACRES MOBILE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O KAY C. WEBSTER  
3290 W PARKVILLE ST LOT #24  
LECANTO, FL 344617914 US**New Principal Place of Business:****Current Mailing Address:**C/O KAY C. WEBSTER  
3290 W PARKVILLE ST LOT #24  
LECANTO, FL 344617914 US**New Mailing Address:****FEI Number:** 59-2891437**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WEBSTER, KAY C  
3290 W PARKVILLE STREET  
LOT#24  
LECANTO, FL 344617914 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: VD ( ) Delete  
Name: JACKSON, JOYCE  
Address: 3290 W PARKVILLE ST LOT 18  
City-St-Zip: LECANTO, FL 344617914

Title: SD ( ) Delete  
Name: DUNN, DEANNA  
Address: 3290 W. PARKVILLE ST., #15  
City-St-Zip: LECANTO, FL 344617914

Title: D ( ) Delete  
Name: MOORE, MILDRED  
Address: 3290 W PARKVILLE ST LOT #10  
City-St-Zip: LECANTO, FL 344617914

Title: TD ( ) Delete  
Name: TOMLIN, RAMONA  
Address: 3290 W PARKVILLE ST LOT #6  
City-St-Zip: LECANTO, FL 344617914

Title: PD ( ) Delete  
Name: WEBSTER, KAY C  
Address: 3290 W. PARKVILLE ST., #24  
City-St-Zip: LECANTO, FL 344617914

Title: D ( ) Delete  
Name: AURIN, WALTER  
Address: 3290 W PARKVILLE ST LOT #17  
City-St-Zip: LECANTO, FL 344617914

**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 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: KAY C. WEBSTER

PD

02/13/2004

Electronic Signature of Signing Officer or Director

Date

JURGEN GRIEGOSCHEWSKI  
3290 W. PARKVILLE ST., LOT #19  
LECANTO FL 34461

CARL HOBBS  
3290 W. PARKVILLE ST., LOT #26  
LECANTO FL 34461

RICHARD DUNN  
3290 W. PARKVILLE ST., LOT #15  
LECANTO FL 34461

CARL HOBBS  
3290

CARL HOBBS  
3290

RICHARD DUNN  
3290 W. PARKVILLE ST., LOT #15  
LECANTO FL 34461

RICHARD DUNN  
3290 W. PARKVILLE ST., LOT #15  
LECANTO FL 34461