

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31009

FILED
Apr 14, 2009
Secretary of State

Entity Name: PINE RANCH EAST OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

392 PINE RANCH TRAIL
OSPREY, FL 34229 US

New Principal Place of Business:

376 PINE RANCH TRAIL
OSPREY, FL 34229 US

Current Mailing Address:

P.O. BOX 1021
OSPREY, FL 34229 US

New Mailing Address:

FEI Number: 65-0106383 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DONTFOWARD
357 PINE RANCH TRAIL
OSPREY, FL 34229 US

Name and Address of New Registered Agent:

DONTFOWARD
376 PINE RANCH TRAIL
OSPREY, FL 34229 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: CATHI CLARK BELL

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEHR, MIKE
Address: 379 PINE RANCH TR
City-St-Zip: OSPREY, FL 34229

Title: S () Delete
Name: HOWARD, DON
Address: 357 PINE RANCH TRAIL
City-St-Zip: OSPREY, FL 34229

Title: T () Delete
Name: CARDADE, JACK
Address: 408 PINE RANCH TR
City-St-Zip: OSPREY, FL 34229

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEBAR, JOSIE
Address: 392 PINE RANCH TR
City-St-Zip: OSPREY, FL 34229

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

Title: T (X) Change () Addition
Name: BELL, CATHI
Address: 376 PINE RANCH TR
City-St-Zip: OSPREY, FL 34229

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: CATHI CLARK BELL

TRES

04/14/2009

Electronic Signature of Signing Officer or Director

Date