2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2007
Secretary of State

DOCUMENT# N31257

Entity Name: PINE CHASE ESTATES HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 59-2996376 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W
2180 WEST SR 434
LONGWOOD, FL 32779 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: VPD ( ) Delete
Name: RODRIGUEZ, JOEY
Address: 2452 PINE CHASE CIR
City-St-Zip: ST CLOUD, FL 34769

Title: PD ( ) Delete
Name: DIAZ, CARLOS
Address: 2700 KAYAK CT
City-St-Zip: ST CLOUD, FL 34722

Title: SD ( ) Delete
Name: KING, BILLY
Address: 3608 WILLOW LAKE CT
City-St-Zip: ST CLOUD, FL 34769

Title: TD ( ) Delete
Name: WHARTON, DAN
Address: 3606 TREE LINE WAY
City-St-Zip: ST CLOUD, FL 34769

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MONBARREN, MARK
Address: 2422 PINE CHASE CIR
City-St-Zip: ST CLOUD, FL 34769

Title: VPD (X) Change ( ) Addition
Name: SCARABIN, KARL
Address: 2438 PINE CHASE CIR
City-St-Zip: ST CLOUD, FL 34769

Title: SD (X) Change ( ) Addition
Name: RODRIGUEZ, CHRISTINA
Address: 2452 PINE CHASE CIR
City-St-Zip: ST CLOUD, FL 34769

Title: TD (X) Change ( ) Addition
Name: REXACH, JOSE R
Address: 2424 PINE CHASE CIR
City-St-Zip: ST CLOUD, FL 34769

Title: D ( ) Change (X) Addition
Name: SLONE, CONSTANCE
Address: 2417 PINE CHASE CIR
City-St-Zip: ST CLOUD, FL 34769

I hereby certify that the information supplied with this filing does not qualify for the 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: MARK MONBARREN PD 04/10/2007

Electronic Signature of Signing Officer or Director — Date