## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31780

FILED Jan 17, 2007 Secretary of State

Entity Name: PINE ISLAND SHORES, UNITS 10 AND 11 HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2193 MACADAMIA LANE 2063 MACADAMIA LANE

ST. JAMES CITY, FL 33956 US ST. JAMES CITY, FL 33956 US

Current Mailing Address: New Mailing Address:

2193 MACADAMIA LANE 2063 MACADAMIA LANE

ST. JAMES CITY, FL 33956 US ST. JAMES CITY, FL 33956 US

FEI Number: 65-0246864 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DUVENECK, CARL WESORICK, RON 2193 MACADAMIA LANE 2063 MACADAMIA LANE

2193 MACADAMIA LANE
ST. JAMES CITY, FL 33956 US
ST. JAMES CITY, FL 33956 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: RON WESORICK 01/17/2007

Electronic Signature of Registered Agent Date

Electronic dignature of registered Agent

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PT ()Delete Title: PT (X)Change ()Addition

 Name:
 DUVENECK, CARL
 Name:
 FOOTE, DANIEL

 Address:
 2193 MACADAMIA LANE
 Address:
 2159 MACADAMIA LANE

 City-St-Zip:
 ST. JAMES CITY, FL 33956 US
 City-St-Zip:
 ST. JAMES CITY, FL 33956 US

Title: VT ( ) Delete Title: VT (X) Change ( ) Addition

Name: JAMES, ROB Name: AMES, SAM

 Address:
 2305 MACADAMIA LANE
 Address:
 2225 MACADAMIA LANE

 City-St-Zip:
 ST JAMES CITY, FL 33956
 City-St-Zip:
 ST JAMES CITY, FL 33956

Title: STTT ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WESORICK, RONALD
 Name:

 Address:
 2063 MACADAMIA LANE
 Address:

 City-St-Zip:
 SAINT JAMES CITY, FL 33956
 City-St-Zip:

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: RON WESORICK STTT 01/17/2007