2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37157

FILED Mar 20, 2009 Secretary of State

Entity Name: PINE LAKE OF LAKELAND MOBILE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 7805 US 98 N. #27 LAKELAND, FL 33809 **Current Mailing Address: New Mailing Address:** 7805 US 98 N. #27 LAKELAND, FL 33809 FEI Number: 59-2998066 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: SHEARL, DONALD 7805 US 98 N. LOT 27 LAKELAND, FL 33809 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SHEARL, DONALD Name: Name: 7805 US 78 N. #27 Address: Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: Title: SD () Delete Title: SD (X) Change () Addition GUSTAVSEN, ELEANOR Name: YOST, EUNICE Name: Address: 7805 US 98 N. #8 Address: 7805 US 98 N. #43 City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33809 Title: () Delete Title: (X) Change () Addition SHEARL, DELORIS SHEAD, DELORIS Name: Name: 7805 US 98 N LOT 27 Address: 7805 US 98 N LOT 8 Address: City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33809 Title: VΡ () Delete Title: (X) Change () Addition Name: ENGLAND, WANDA Name: NICHOLS, LOREN Address: 7805 US 98 N LOT 18 Address: 7805 US 98 N LOT 40 City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33809 Title: () Delete Title: () Change (X) Addition NICHOLS, RUTH Name: Name: 9805 US 98 N LOT 40 Address: Address: City-St-Zip: City-St-Zip: LAKELAND, FL 33809 Title: () Delete Title: () Change (X) Addition ENGLAND, WANDA Name: Name: Address: Address: 9805 US 98 N LOT19 LAKELAND, FL 33809 City-St-Zip: 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: DONALD SHEARL PD 03/20/2009