

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 19, 2008 08:00 AM
Secretary of State

DOCUMENT # N37911

1. Entity Name
PINE TREE TERRACE HOMEOWNERS ASSOCIATION,
INC.



Principal Place of Business
8608 SE WOODWIND STREET
HOBE SOUND, FL 33455 US

Mailing Address
8608 SE WOODWIND STREET
HOBE SOUND, FL 33455 US



03272008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0177287

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

CORNETT, JANE L
401 E OSCEOLA ST
STUART, FL 34995

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D
NAME BUCHOFF, MARGARET
STREET ADDRESS 8608 SE WOOD WIND ST
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE D
NAME GOOLSBY, ALLEN
STREET ADDRESS 8789 SE WOODWIND ST.
CITY-ST-ZIP HOBE SOUND, FL

TITLE D
NAME HULL, MARTA
STREET ADDRESS 8628 SE WOODWARD ST.
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE D
NAME BOHATYRITZ, THOMAS
STREET ADDRESS 8609 SE WOODWIND ST
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE D
NAME PASS JR, EDGAR
STREET ADDRESS 8768 SE WOODWIND ST
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE D
NAME EVES, PATRICK
STREET ADDRESS 8547 SE WOODWIND ST
CITY-ST-ZIP HOBE SOUND, FL 33455

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06/04/08-80047-003 70.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edgar Pass Jr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/01/08
Date

(772) 546-0398
Daytime Phone #