2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2009
Secretary of State

DOCUMENT# N41670

Entity Name: PINE GLEN AT ABBEY PARK I HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O DAVENPORT PROF PROP MGMT INC
6620 LAKE WORTH RD, STE F
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

C/O DAVENPORT PROF PROP MGMT INC
6620 LAKE WORTH RD, STE F
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 65-0421857 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TUCKER & TIGHE PA
800 E BROWARD BLVD
SUITE 710
FORT LAUDERDALE, FL 33301 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: P ( ) Delete
Name: SMITH, CHRIS A
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: VPD ( ) Delete
Name: LEE, CHARLES
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: TD ( ) Delete
Name: RIVERA, YVONNE
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: S (X) Delete
Name: STEWART, DELORIS
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: D (X) Delete
Name: TIRADO, ANA
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: DIAZ, LUIS
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: TD (X) Change ( ) Addition
Name: LEE, CHARLES
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

Title: SD (X) Change ( ) Addition
Name: STEWART, DELORES
Address: 6620 LAKE WORTH RD, STE F
City-St-Zip: LAKE WORTH, FL 33467

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: L. DIAZ P 04/17/2009

Electronic Signature of Signing Officer or Director — Date