

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
 AMOUNT DUE ON OR BEFORE 8/9/95: \$100 (IF DISSOLVED, UNPAID AMOUNT DUE TO RESTATE: \$200)

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morham
 Secretary of State

1995 7-12-95 7-7-95

FILED

1995 JUL 12 AM 9:32

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # N41912 (9)

1. Corporation Name

PINEWOODS LAKES ASSOCIATION, INC.

Principal Place of Business Mailing Address

~~C/O JILL BURZYNSKI-EGGURE~~ ~~305 FIFTH AVE S~~
~~805 5TH AVE S~~ ~~#204~~
~~NAPLES FL 33940~~ ~~NAPLES FL 33940~~
~~UG~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/01/1991 3a. Date of Last Report 04/11/1994
 4. FEI Number NOT APPLICABLE Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address

21 4412 WILDER ROAD 25 4412 WILDER ROAD

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 NAPLES, FLORIDA 27 NAPLES, FLORIDA

23 33942 28 COLLIER 29 33942 30 USA

5. Certificate of Status Desired \$0.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 7. Nonprofit with IRS 501(c)(3) Tax Exempt Status FILING FEE IS \$61.25
 8. This corporation has liability for intangible tax under s. 193.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

~~BURZYNSKI, JILL EGGURE~~
~~805 FIFTH AVE S~~
~~#204~~
~~NAPLES FL 33940~~

10. Name and Address of New Registered Agent

81 Name GEORGE M. WALTERS, JR.
 82 Street Address (P.O. Box Number is Not Acceptable) 4412 WILDER ROAD
 83
 84 City NAPLES FL 85 Zip Code 33942

11. Pursuant to the provisions of Sections 617.0502 and 617.1608, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE George M. Walters, Jr. GEORGE M. WALTERS, JR. 7-7-95
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

TITLE	PD
NAME	BOWDEN, WILLIAM
STREET ADDRESS	2310 PINE WOODS CIRCLE
CITY - ST - ZIP	NAPLES FL
TITLE	VTD
NAME	WALTERS, GEORGE
STREET ADDRESS	4412 WILDER ROAD
CITY - ST - ZIP	NAPLES FL
TITLE	SD
NAME	MULLEN, RICHARD
STREET ADDRESS	1400 MISTY PINES CIRCLE
CITY - ST - ZIP	NAPLES FL
TITLE	D
NAME	WORRELL, ROY OLIVER
STREET ADDRESS	800 MISTY PINES CIRCLE
CITY - ST - ZIP	NAPLES FL
TITLE	D
NAME	EICHHORN, GORDON
STREET ADDRESS	1600 MISTY PINES CIRCLE
CITY - ST - ZIP	NAPLES FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: George M. Walters, Jr. GEORGE M. WALTERS, JR. 7-7-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE
 (941) 262-8800 EXT. 191

CR2E037 (3/95)