

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41912

FILED
May 05, 2010
Secretary of State

Entity Name: PINWOODS LAKES ASSOCIATION, INC.

Current Principal Place of Business:

1600 MISTY PINES CIRCLE
APT. 202
NAPLES, FL 34105 US

New Principal Place of Business:

Current Mailing Address:

C/O FINANCIAL MANAGEMENT SERVICES
P.O. BOX 11496
NAPLES, FL 341011496

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

EICHHORN, GORDON
1600 MISTY PINES CIR #202
NAPLES, FL 34105 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:

Title: PD
Name: EICHHORN, GORDON
Address: 1600 MISTY PINES CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: VD
Name: JENSEN, RICHARD
Address: 600 MISTY PINE CIRCLE #104
City-St-Zip: NAPLES, FL 34105

Title: STD
Name: WEBER, MARGARETE
Address: 1400 MISTY PINE CIRCLE #202
City-St-Zip: NAPLES, FL 34105

Title: D
Name: CARROL, PETER
Address: 1600 MISTY PINES CIRCLE
City-St-Zip: NAPLES, FL 34105

Title: D
Name: HARRISON, SIMPSON
Address: 4447 WILDER ROAD
City-St-Zip: NAPLES, FL 34105

I hereby 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 all other like empowered.

SIGNATURE: DAWN MCCULLOUGH

ACCT

05/05/2010

Electronic Signature of Signing Officer or Director

Date