

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44726

FILED
Feb 12, 2005
Secretary of State

Entity Name: LAKES OF PINE RUN HOMESITES OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

304 SAWMILL CREEK COURT
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

304 SAWMILL CREEK COURT
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-3183182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOHREN, JOHN F
304 SAWMILL CREEK COURT
ORMOND BEACH, FL 32174 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: DS () Delete
Name: HADDOCK, LAURA
Address: 402 BUSHNELL PARK COURT
City-St-Zip: ORMOND BEACH, FL 32174

Title: DS () Delete
Name: POLITO, DONNA
Address: 401 BUSHNELL PARK CT
City-St-Zip: ORMOND BEACH, FL 32174

Title: DP () Delete
Name: BOHREN, JOHN
Address: 304 SAWMILL CREEK COURT
City-St-Zip: ORMOND BEACH, FL 32174

Title: DS (X) Delete
Name: JANES, THOMAS
Address: 414 BUSHNELL PARK COURT
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: HADDOCK, LAURA
Address: 402 BUSHNELL PARK COURT
City-St-Zip: ORMOND BEACH, FL 32174

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

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 for the exemption stated in Section 119.07(3)(i), 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: JOHN BOHREN

P

02/12/2005

Electronic Signature of Signing Officer or Director

Date