

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48451

FILED
Aug 26, 2006
Secretary of State

Entity Name: PINE ISLAND ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

FLORIDA BOYS RANCH ROAD
GROVELAND, FL 34736 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 892
GROVELAND, FL 34736 US

New Mailing Address:

FEI Number: 59-3270075 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

RODNEY, RACHEL
9840 SKYLARK LANE
GROVELAND, FL 34736 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: PD () Delete
Name: RODNEY, RACHEL
Address: 9840 SKYLARK LANE
City-St-Zip: GROVELAND, FL 34736

Title: D () Delete
Name: HELIG, MARY
Address: 6901 EAST EDGEWATER DRIVE #312
City-St-Zip: CORAL GABLES, FL 33133

Title: D (X) Delete
Name: GANZENMULLER, GEORGE
Address: 1805 MAGUIRE RD
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: OLESEN, KENNETH
Address: 9904 SKYLARK LANE
City-St-Zip: GROVELAND, FL 34736

Title: D () Delete
Name: COOPER, BOB
Address: 8939 COURTYARD LANE
City-St-Zip: GROVELAND, FL 34736

Title: D (X) Delete
Name: BAGLEY, ROBERT
Address: 8929 LAKE MABEL DR
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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 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: RACHEL RODNEY

PD

08/26/2006

Electronic Signature of Signing Officer or Director

Date