

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90156 004 ****61.25

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1. Entity Name
PINEDA CROSSING HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business
1617 COOLING AVE.
MELBOURNE, FL 32935

Mailing Address
1617 COOLING AVE.
MELBOURNE, FL 32935

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03302005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0430915

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPACE COAST PROPERTY MANAGEMENT OF BREVARD
1617 COOLING AVENUE
MELBOURNE, FL 32935

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME MOZINGO, TOM
STREET ADDRESS 4954 PIGEON PLUM CIRCLE
CITY-ST-ZIP MELBOURNE, FL 32940

TITLE D ☐ Delete
NAME CUPOLI, RICK
STREET ADDRESS 4145 LONG LEAF DR.
CITY-ST-ZIP MELBOURNE, FL 32940

TITLE DT ☐ Delete
NAME GADRIS, DILINA D
STREET ADDRESS 4797 ALAMEDA DR.
CITY-ST-ZIP MELBOURNE, FL 32940

TITLE DVP ☐ Delete
NAME WARREN, STEWART
STREET ADDRESS 5026 INDIGO WAY
CITY-ST-ZIP MELBOURNE, FL 32940

TITLE SD ☒ Delete
NAME WOLF, SHARAE
STREET ADDRESS 3059 LONG LEAF DR.
CITY-ST-ZIP MELBOURNE, FL 32940

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP ☒ Change ☐ Addition
NAME MOZINGO, TOM
STREET ADDRESS 4954 PIGEON PLUM CIR
CITY-ST-ZIP MELBOURNE, FL 32940

TITLE ☒ Change ☐ Addition
NAME Cupoli, Rick
STREET ADDRESS 4777 Alameda Dr.
CITY-ST-ZIP Melbourne, FL 32940

TITLE ☒ Change ☐ Addition
NAME Gaddis, Dilina K.
STREET ADDRESS 4797 Alameda Dr.
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Robert Powers
STREET ADDRESS 3423 Pineda Crossing Drive
CITY-ST-ZIP Melbourne, FL 32940

TITLE ☐ Change ☒ Addition
NAME Albert SAI A
STREET ADDRESS 4798 Alameda Dr.
CITY-ST-ZIP Melbourne, FL 32940

TITLE ☐ Change ☒ Addition
NAME NATHAN HEUBERGER
STREET ADDRESS 4228 LONG LEAF DR.
CITY-ST-ZIP MELBOURNE, FL 32940

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Thomas P. Mozingo THOMAS P. MOZINGO

4/19/05

321-242-6682

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Phone #