

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 05, 2011
Secretary of State

Entity Name: PINE LAKES GOLF CLUB OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

15771 NORTHSIDE DR. WEST
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 18763
JACKSONVILLE, FL 32229

New Mailing Address:

FEI Number: 59-3311915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CINTORINO, RICHARD P
15771 NORTHSIDE DRIVE WEST
JACKSONVILLE, FL 32218 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
Name: WHIDDON, LAUREN GLENN
Address: 15801 JIM COURT
City-St-Zip: JACKSONVILLE, FL 32218

Title: TD
Name: CINTORINO, RICHARD P
Address: 15771 NORTHSIDE DRIVE WEST
City-St-Zip: JACKSONVILLE, FL 32218

Title: D
Name: GARRICK, EUGENE
Address: 15753 JIM COURT.
City-St-Zip: JACKSONVILLE, FL 32218

Title: D
Name: EVANS, ERIC
Address: 15638 MOSS HOLLOW DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

Title: SD
Name: TINSLEY, DEBRA
Address: 15793 JIM COURT
City-St-Zip: JACKSONVILLE, FL 32218

Title: VD
Name: SWEARINGEN, BRUCE
Address: 15791 NORTHSIDE DRIVE EAST
City-St-Zip: JACKSONVILLE, FL 32218

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: RICHARD P. CINTORINO

TD

03/05/2011

Electronic Signature of Signing Officer or Director

Date