

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000002869

**FILED**  
**Jan 19, 2010**  
**Secretary of State**

**Entity Name:** PINE COURT, INC.

**Current Principal Place of Business:**

1696 TALL TIMBER DRIVE  
ORANGE PARK, FL 32003 US

**New Principal Place of Business:**

1696 TALL TIMBER DRIVE  
FLEMING ISLAND, FL 32003 US

**Current Mailing Address:**

PO BOX 8548  
FLEMING PARK, FL 32006 US

**New Mailing Address:**

**FEI Number:** 59-3300665

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SANTORO, THOMAS C ESQ  
1700 WELLS ROAD  
SUITE 5  
ORANGE PARK, FL 32073 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:** VD  
**Name:** WATERS, SUZANNE  
**Address:** 1644 TALL TIMBER DR  
**City-St-Zip:** FLEMING ISLAND, FL 32003

**Title:** PTD  
**Name:** DIMONDA, RAYMOND  
**Address:** 1696 TALL TIMBER DR  
**City-St-Zip:** FLEMING ISLAND, FL 32003

**Title:** SD  
**Name:** CRIER, ALCIA  
**Address:** 1697 TALL TIMBER DRIVE  
**City-St-Zip:** FLEMING ISLAND, FL 32003

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:** RAYMOND P. DIMONDA

PTD

01/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date