

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003314

FILED  
Jan 10, 2007  
Secretary of State

**Entity Name:** THE SANCTUARY AT PINECREST MAINTENANCE ASSOCIATION, INC.

**Current Principal Place of Business:**

10987 S.W. 59TH CT.  
PINECREST, FL 33156 US

**New Principal Place of Business:**

**Current Mailing Address:**

10987 S.W. 59TH CT.  
PINECREST, FL 33156 US

**New Mailing Address:**

**FEI Number:** 65-0781214      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ROHAN, RONALD H DR  
10987 S.W. 59TH CT.  
PINECREST, FL 33156 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: SECT ( ) Delete  
Name: ROHAN, RONALD H DR  
Address: 10987 SW 59 CT  
City-St-Zip: PINECREST, FL 33156 US

Title: PD ( ) Delete  
Name: OTTO, CARRIE M MS  
Address: 10949 S.W. 59TH COURT  
City-St-Zip: PINECREST, FL 33156 US

Title: VPD ( ) Delete  
Name: BOWERS, RICHARD C MR  
Address: 10950 SW 59 COURT  
City-St-Zip: PINECREST, FL 33156

**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:

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: RONALD H. ROHAN

SECT

01/10/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date