

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90843 005 ****61.25

DOCUMENT # N94000004639					
1. Entity Name PINEHURST ESTATES CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 40 SARASOTA CENTER BLVD UNIT 108A SARASOTA, FL 34240			Mailing Address 40 SARASOTA CENTER BLVD UNIT 108A SARASOTA, FL 34240		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0529985	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CMR PROPERTY MANAGEMENT, INC. DONNIE P. KENNEDY 40 SARASOTA CENTER BLVD, UNIT 108A SARASOTA, FL 34240			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P STONE, MICHAEL 7452 ELEANOR CIR SARASOTA, FL 34243		TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Reba Pressley 7328 Eleanor Circle Sarasota, FL 34243	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD DOUGHERTY, JOHN P 7469 ELEANOR CIR. SARASOTA, FL 34243		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HENEGAR, SHERILL 7420 ELEANOR CIRCLE SARASOTA, FL 34243		TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GUNBY, LES 7325 ELEANOR CR SARASOTA, FL 34243		TITLE NAME STREET ADDRESS CITY - ST - ZIP	P	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Salvatore Bonfanti Sec. 7482 Eleanor Circle Sarasota, FL 34243	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date _____ Daytime Phone # _____					