

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2005 8:00 am
Secretary of State

03-01-2005 90079 028 ****61.25

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1. Entity Name

PINEY POINT ACTIVITIES ASSOCIATION, INC.



Principal Place of Business

8624 29TH AVE E
PALMETTO FL 34221
US

Mailing Address

9026 32ND AVE E
PALMETTO FL 34221
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0749321

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

HANKS, SUSAN C. CPA
% PEACOCK & COMPANY, PA
133 S. HARBOR DRIVE
VENICE FL 34285

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

**FILE NOW: 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	TD	<input checked="" type="checkbox"/> Delete
NAME	ADAMS, DAVID	
STREET ADDRESS	3011 93RD ST E	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	BRUNDIGE, WILLIAM	
STREET ADDRESS	9207 28TH AVE DR E	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	SMITH, SHEILA	
STREET ADDRESS	9111 31ST AVE E	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	D	<input type="checkbox"/> Delete
NAME	EMM, JENNIE	
STREET ADDRESS	8914 34TH AVE E	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	STIVING, CLEM	
STREET ADDRESS	3205 89TH STREET E	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	CELLI, LOUIS	
STREET ADDRESS	8905 31ST AVE E	
CITY-ST-ZIP	PALMETTO FL 34221	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sue Brundige	
STREET ADDRESS	9207 28th Ave Dr E.	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Shirley Cooper	
STREET ADDRESS	8914 31st Ave E.	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Joe Groenendyk	
STREET ADDRESS	3007 89th St E.	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Richard Bregar	
STREET ADDRESS	9020 28th Ave Dr E.	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Chet Stefaniak	
STREET ADDRESS	2932 86th St Circle E.	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Richard Bregar* Richard Bregar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 24, 2005 941-722-0055

Date

Daytime Phone #