

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2004 8:00 am
Secretary of State

02-27-2004 90031 038 ****61.25

DOCUMENT # N97000005965 1. Entity Name PINEY-Z HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 950 PINEY Z PLANTATION RD. TALLAHASSEE, FL 32311			Mailing Address 950 PINEY Z PLANTATION RD. TALLAHASSEE, FL 32311		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3569696	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROBERTS, KYLE 950 PINEY Z PLANTATION RD. TALLAHASSEE, FL 32311				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 reappointing)					
Filing Fee is \$61.25 Due by May 1, 2004		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD NAME ROBERTS, KYLE STREET ADDRESS 950 PINEY Z PLANTATION RD. CITY-ST-ZIP TALLAHASSEE, FL 32301	☐ Delete		TITLE SECRETARY NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition	
TITLE VPD NAME BRIDGES, JAN STREET ADDRESS 950 PINEY-Z PLANTATION ROAD CITY-ST-ZIP TALLAHASSEE, FL 32301	☒ Delete		TITLE V-PRES NAME CLAUDIA VACCARO STREET ADDRESS 950 Piney-2 Plantation Rd CITY-ST-ZIP Tallahassee, FL 32301	☐ Change ☒ Addition	
TITLE TD NAME ECCARO, DAVID STREET ADDRESS 950 PINEY-Z PLANTATION ROAD CITY-ST-ZIP TALLAHASSEE, FL 32301	☒ Delete		TITLE TREAS. NAME EVELYN SCHNEIDER STREET ADDRESS 950 Piney-2 Plantation Rd CITY-ST-ZIP Tallahassee, FL 32301	☐ Change ☒ Addition	
TITLE SD NAME KELLY, MILDRED STREET ADDRESS 950 PINEY-Z PLANTATION ROAD CITY-ST-ZIP TALLAHASSEE, FL 32301	☐ Delete		TITLE PRESIDENT NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition	
TITLE D NAME KASEK, MARY STREET ADDRESS 950 PINEY-Z PLANTATION ROAD CITY-ST-ZIP TALLAHASSEE, FL 32301	☒ Delete		TITLE Director NAME DORIS KALLE STREET ADDRESS 950 Piney-2 Plantation Rd CITY-ST-ZIP Tallahassee, FL 32301	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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: EVELYN SCHNEIDER			03-01-04 850-877-8606		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

J4041010



02082004 Chg-NP CR2E037 (10/03)