

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006294

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: KANAPAHA PINES UNIT III OWNERS' ASSOCIATION , INC.

**Current Principal Place of Business:**

5522 NW 43RD ST  
SUITE B  
GAINESVILLE, FL 32653

**New Principal Place of Business:**

**Current Mailing Address:**

5522 NW 43RD ST  
SUITE B  
GAINESVILLE, FL 32653

**New Mailing Address:**

FEI Number: 59-3628153      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MORALES, CAROL A  
C/O BOSSHARDT PROPERTY MGT., INC  
5522-B NW 43RD STREET  
GAINESVILLE, FL 32653 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: DP ( ) Delete  
Name: VAN CLEAVE, LARRY  
Address: 10004 SW 87 TERRACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete  
Name: KOWAL, BRAD  
Address: 10008 SW 89 ST  
City-St-Zip: GAINESVILLE, FL 32608

Title: DT ( ) Delete  
Name: GRISWOLD, TED  
Address: 8724 SW 98 AVENUE  
City-St-Zip: GAINESVILLE, FL 32608

Title: VPD ( ) Delete  
Name: MENEFRE, MIKE  
Address: 10003 SW 90TH ST.  
City-St-Zip: GAINESVILLE, FL 32608

Title: DS ( ) Delete  
Name: MCCAFFERTY, TOM  
Address: 10007 SW 87 TERR  
City-St-Zip: GAINESVILLE, FL 32608

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: PUCKETT, DAN  
Address: 8805 SW 98 AVENUE  
City-St-Zip: GAINESVILLE, FL 32608

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: WIRTH, JOSHUA  
Address: 8912 SW 98TH AVENUE  
City-St-Zip: GAINESVILLE, FL 32608

Title: DS (X) Change ( ) Addition  
Name: ORESKY, KERRY J  
Address: 10018 SW 89TH STREET  
City-St-Zip: GAINESVILLE, FL 32608

I hereby certify that the information supplied with this filing does not qualify 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: LARRY VAN CLEAVE

PRES

04/27/2009

Electronic Signature of Signing Officer or Director

Date