

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000008

FILED
Jul 22, 2005
Secretary of State

Entity Name: PINE LAKES COMMUNITY ASSOCIATION INC.

Current Principal Place of Business:

31635 LAKEVIEW DRIVE
EUSTIS, FL 32736

New Principal Place of Business:

Current Mailing Address:

31635 LAKEVIEW DRIVE
EUSTIS, FL 32736

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TODD, JAMES E
32725 PINE ROAD
EUSTIS, FL 32736 US

Name and Address of New Registered Agent:

TODD, JAMES E
32325 E SR44
EUSTIS, FL 32736 US

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:

07/22/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TODD, JAMES
Address: 32325 E SR 44
City-St-Zip: EUSTIS, FL 32736

Title: VD () Delete
Name: HARBIN, BETTY
Address: 31514 DIVISION ST.
City-St-Zip: DELAND, FL 32720

Title: S () Delete
Name: TODD, MARY
Address: 32325 E SR 44
City-St-Zip: EUSTIS, FL 32736

Title: T () Delete
Name: SCHAEFFER, EILEEN
Address: 39321 COOT DR.
City-St-Zip: EUSTIS, FL 32736

Title: D () Delete
Name: HARBIN, TOM
Address: 31514 DIVISION ST.
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: TRAYLOR, ESTELLE
Address: 39211 COOT DR
City-St-Zip: EUSTIS, FL 32736

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:

Title: () Change () Addition
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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 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 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: JAMES TODD

P

07/22/2005

Electronic Signature of Signing Officer or Director

Date