

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N990000000008

FILED
Apr 30, 2008
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 ()

Name and Address of Current Registered Agent:

TODD, JAMES E
32325 E SR 44
EUSTIS, FL 32736 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: 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: DAY, LOIS
Address: 38990 FOREST DRIVE
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: BURNS, MARY W
Address: 42051 DOGWOOD AVE.
City-St-Zip: DELAND, FL 32720

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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Title: () Change () Addition
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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 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: JAMES E. TODD

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date