

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003422

FILED
May 02, 2010
Secretary of State

Entity Name: IN THE PINES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O ALLIED PROPERTY MANAGEMENT GROUP INC
1711 WORTHINGTON RD SUITE 103
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

C/O ALLIED PROPERTY MANAGEMENT GROUP, INC.
1711 WORTHINGTON RD, STE 103
WEST PALM BEACH, FL 33409 US

Current Mailing Address:

C/O ALLIED PROPERTY MANAGEMENT GROUP INC
1711 WORTHINGTON RD SUITE 103
WEST PALM BEACH, FL 33409 US

New Mailing Address:

C/O ALLIED PROPERTY MANAGEMENT GROUP, INC.
1711 WORTHINGTON RD, STE 103
WEST PALM BEACH, FL 33409 US

FEI Number: 65-0958608 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

ALLIED PROPERTY MANAGEMENT GROUP INC
1711 WORTHINGTON RD
SUITE 103
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

TUCKER & TIGHE, PA
800 E. CUMBERLAND BROWARD BLVD
CUMBERLAND BLDG, STE 710
WEST PALM BEACH, FL 33409 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: TUCKER & TIGHE, PA

05/02/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: FISH, ROBERT DR.
Address: 1711 WORTHINGTON RD, STE 103
City-St-Zip: WEST PALM BEACH, FL 33409

Title: STD
Name: MORRIS, STUART
Address: 1711 WORTHINGTON RD, STE 103
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D
Name: ROTHENBERG, MARK
Address: 1711 WORTHINGTON RD, STE 103
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby 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 all other like empowered.

SIGNATURE: DR. ROBERT FISH

P

05/02/2010

Electronic Signature of Signing Officer or Director

Date