


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 08, 2004 08:00 AM
Secretary of State

DOCUMENT # N99000007345
1. Entity Name
PINECASTLE COMMERCE CENTER OWNERS' ASSOCIATION, INC.



Principal Place of Business
**1321 EDGEWATER DR., STE 6
ORLANDO, FL 32804**

Mailing Address
**P.O. BOX 536785
ORLANDO, FL 32835-6785**

DO NOT WRITE IN THIS SPACE



01082004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3156052	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**BANKSTON, JAMES W.
1321 EDGEWATER DR., STE 6
ORLANDO, FL 32804**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANKSTON, CHESTER W 1321 EDGEWATER DR., STE 6 ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAILES, CHARLES E JR. 1321 EDGEWATER DR., STE 6 ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANKSTON, JAMES W 1321 EDGEWATER DR., STE 6 ORLANDO, FL 32804
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04/08/04-80024-008 61.25

**DO NOT WRITE
IN THIS SPACE**

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: *James W. Bankston* James W. Bankston 4/1/04 407-650-8802
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #