2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078226

4853 CYPRESS DR S

BOYNTON BEACH, FL 33436

Address: City-St-Zip:

Entity Name: PINE OAKS, INC.

FILED Apr 21, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Principal Pla	New Principal Place of Business:	
10190 52ND PLACE SOUTH LAKE WORTH, FL 33467				10190 52ND PLACE SOUTH LAKE WORTH, FL 33449	
Current N	lailing Addres	s:	New Mailing Add	ress:	
10190 52ND PLACE SOUTH LAKE WORTH, FL 33467				10190 52ND PLACE SOUTH LAKE WORTH, FL 33449	
FEI Number	: 65-1050848	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
685 ROYA SUITE 205 ROYAL PA	ALM BEACH, FI	HBLVD _ 33411 US	ournose of changing its regis	tered office or registered agent, or both,	
	e of Florida.	ubilitis tilis statement for the p	ourpose of changing its regis	tered office of registered agent, or bottl,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S () DUFFY, BRIAN 10190 52ND PL LAKE WORTH,	_	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () REESE, RUSSE 1631 ROCK TER W PALM BEACH	RR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VP () CHUREY, JOHN	Delete	Title: Name:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: BRIAN DUFFY S 04/21/2009