

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000096316

FILED
Jul 01, 2004
Secretary of State

Entity Name: PINES WEST OF POLK COUNTY, INC.

Current Principal Place of Business:

2281 LEE ROAD
SUITE 103
WINTER PARK, FL 32789

Current Mailing Address:

2281 LEE ROAD
SUITE 103
WINTER PARK, FL 32789

New Principal Place of Business:

2281 LEE ROAD
SUITE 204
WINTER PARK, FL 32789

New Mailing Address:

2281 LEE ROAD
SUITE 204
WINTER PARK, FL 32789

FEI Number: 59-3675930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PIEKIEWICZ, STANLEY T
2281 LEE ROAD
SUITE 103
WINTER PARK, FL 32789

Name and Address of New Registered Agent:

PIEKIEWICZ, STANLEY T
2281 LEE ROAD
SUITE 204
WINTER PARK, FL 32789

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: STANLEY T. PIETKIEWICZ

07/01/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PIETKIEWICZ, STANLEY T
Address: 2281 LEE RD STE 103
City-St-Zip: WINTER PARK, FL 32789

Title: VPTS () Delete
Name: AVERY, DELL
Address: 2281 LEE RD STE 103
City-St-Zip: WINTER PARK, FL 32789

Title: VP () Delete
Name: KARST, CRAIG
Address: 2281 LEE RD STE 103
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PIETKIEWICZ, STANLEY T
Address: 2281 LEE RD STE 204
City-St-Zip: WINTER PARK, FL 32789

Title: VPTS (X) Change () Addition
Name: AVERY, DELL
Address: 2281 LEE RD STE 204
City-St-Zip: WINTER PARK, FL 32789

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

SIGNATURE: STANLEY T. PIETKIEWICZ

D

07/01/2004

Electronic Signature of Signing Officer or Director

Date