

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 18, 2007 8:00 am
Secretary of State

05-18-2007 90215 001 *2,550.00

DOCUMENT # P02000064370

1. Entity Name
PINECREST VILLAGE CONDOMINIUM, INC.



Principal Place of Business
**1775 BROADWAY
23RD FLOOR
NEW YORK, NY 10019**

Mailing Address
**ATTN: KATHRYN MANSFIELD
3100 MONTICELLO AVE., SUITE 200
DALLAS, TX 75205**

00013330



2. Principal Place of Business - No P.O. Box #
423 West 55th Street

Suite, Apt. #, etc.
12th Floor

City & State
New York, NY

Zip
10019

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

05102007 Chg-P CR2E034 (12/06)

4. FEI Number
73-1649786

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____

**FILE NOW!!! FEE IS \$550.00
Due by September 14, 2007**

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,P FRIEDMAN, WILLIAM S 1775 BROADWAY 23RD FL NEW YORK, NY 10019 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP,S RUBENSTEIN, CHARLES D 1775 BROADWAY 23RD FLOOR NEW YORK, NY 10019 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPAS SCHAFER, RICHARD 1775 BROADWAY 23RD FL NEW YORK, NY 10019 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPAS SHAPIRO, HOWARD 1775 BROADWAY 23 RD FLOOR NEW YORK, NY 10019 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP HELMAN, JAMES R 1775 BROADWAY, 23RD FLOOR NEW YORK, NY 10019 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | |
|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 423 West 55th Street, 12th Floor New York NY 10019 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 423 West 55th Street, 12th Floor New York, NY 10019 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 423 West 55th Street, 12th Floor New York, NY 10019 |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 423 West 55th Street, 12th Floor New York, NY 10019 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition EVP Kathryn Mansfield 3100 Monticello Ave #200 Dallas TX 75205 |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kathryn Mansfield **Kathryn Mansfield, EVP** 5/15/2007 214/599-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #