

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000148511

Entity Name: PINE TRAIL DEVELOPERS, INC.

FILED  
Apr 29, 2005  
Secretary of State

## Current Principal Place of Business:

4901 N. FEDERAL HIGHWAY, SUITE 400  
FORT LAUDERDALE, FL 33444

## New Principal Place of Business:

101 PLAZA REAL SOUTH  
ROYAL PALM PLACE, SUITE 200  
BOCA RATON, FL 33432

## Current Mailing Address:

4901 N. FEDERAL HIGHWAY, SUITE 400  
FORT LAUDERDALE, FL 33444

## New Mailing Address:

101 PLAZA REAL SOUTH  
ROYAL PALM PLACE, SUITE 200  
BOCA TATON, FL 33432

FEI Number: 20-0397369

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CAROSELLA, JOE  
4901 N. FEDERAL HIGHWAY, SUITE 400  
FORT LAUDERDALE, FL 33444 US

## Name and Address of New Registered Agent:

CAROSELLA, JOE  
101 PLAZA REAL SOUTH  
ROYAL PALM PLACE, SUITE 200  
BOCA RATON, FL 33432 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: JOE CAROSELLA

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: CAROSELLA, JOE  
Address: 4901 N. FEDERAL HIGHWAY, SUITE 400  
City-St-Zip: FORT LAUDERDALE, FL 33444

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CAROSELLA, JOE  
Address: 101 PLAZA REAL SOUTH, SUITE 200  
City-St-Zip: BOCA RATON, FL 33432

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: JOE CAROSELLA

PD

04/29/2005

Electronic Signature of Signing Officer or Director

Date