## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000022248

Entity Name: BIG PINE LODGE INC

FILED Apr 24, 2008 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
10302 NW SUITE # 3 MEDLEY, F	SOUTH RIVEF L 33178	R DRIVE			
Current Mailing Address:			New Mailing Address:		
10302 NW SOUTH RIVER DRIVE SUITE # 3 MEDLEY, FL 33178					
FEI Number: 20-8467439 FEI Number Applied For ( ) FEI N		lumber Not Appl	umber Not Applicable ( ) Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and				Address of New Registered Agent:	
KANONITZ, JAKE 10302 NW SOUTH RIVER DRIVE SUITE # 3 MEDLEY, FL 33178 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:					
Electronic Signature of Registered Agent				Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KANONITZ, JAK	TH RIVER DRIVE #3	Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition KANONITZ, JAKE 10302 NW SOUTH RIVER DRIVE # 3 MEDLEY, FL 33178	
Title: Name: Address: City-St-Zip:	SAN QUINTIN, IS	TH RIVER DRIVE #3	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition KANONITZ, APRIL L 10302 NW SOUTH RIVER DRIVE #3 MEDLEY,, FL 33178	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition KANONITZ, KAYLA 10302 NW SOUTH RIVER DRIVE #3 MEDLEY, FL 33178	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	S () Change (X) Addition KANONITZ, ISABELLA 10302 NW SOUTH RIVER DRIVE #3 MEDLEY, FL 33178	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition KANONITZ, REBECCA M 10302 NW SOUTH RIVER DRIVE #3 MEDLEY, FL 33178	

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.

SIGNATURE: JAKE KANONITZ P 04/24/2008