

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000066156

FILED
Feb 12, 2007
Secretary of State

Entity Name: PINE VISTA ENTERPRISES, INC.

Current Principal Place of Business:

115 FOREST POINT LANE
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 915204
LONGWOOD, FL 32791 US

New Mailing Address:

FEI Number: 59-3594839

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVIGNE, JAMES
7087 GRAND NATIONAL DRIVE
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

LAVIGNE, JAMES R VPD
7087 GRAND NATIONAL DRIVE
ORLANDO, FL 32819 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: JAMES R. LAVIGNE

02/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NOLAN, JOHN
Address: 115 FOREST POINT LANE
City-St-Zip: LONGWOOD, FL 32779 US

Title: D () Delete
Name: WARREN, CRAIG
Address: P. O. BOX 483
City-St-Zip: ST. LEONARDS, NSW 1590, AUSTRAL,

Title: VPD () Delete
Name: LAVIGNE, JAMES
Address: 7087 GRAND NATIONAL DR
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NOLAN, JOHN A DIRECTO
Address: 115 FOREST POINT LANE
City-St-Zip: LONGWOOD, FL 32779 US

Title: D (X) Change () Addition
Name: WARREN, CRAIG W DIRECTO
Address: 10 CHILVERS ROAD, UNIT 1
City-St-Zip: THORNLEIGH NSW 2120 AUSTRALI, FL 2120 AU

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 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: JOHN A. NOLAN

D

02/12/2007

Electronic Signature of Signing Officer or Director

Date