

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763642

**Entity Name:** PINEGROVE VILLAGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6872 TIMBER PINES BLVD.  
SPRING HILL, FL 34606

**Current Mailing Address:**

6872 TIMBER PINES BLVD.  
SPRING HILL, FL 34606 US

**FEI Number:** 59-2209023

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TIMBER PINES COMMUNITY ASSOCIATION  
6872 TIMBER PINES BOULEVARD  
SPRING HILL, FL 34606 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

**Officer/Director Detail :**

Title PD  
Name SMITH, BONNIE  
Address 2103 FORESTER WAY  
City-State-Zip: SPRING HILL FL 34606

Title TD  
Name WEST, CHUCK  
Address 6500 NATURE PRESERVE LANE  
City-State-Zip: SPRING HILL FL 34606

Title D  
Name LEVY, MARY ELLEN  
Address 7346 WOODHOLLOW ROAD  
City-State-Zip: SPRING HILL FL 34606

Title VD  
Name JOHNSON, GARY  
Address 2054 WOODCUTTER COURT  
City-State-Zip: SPRING HILL FL 34606

Title D  
Name ELASHIK, JOHN  
Address 2109 POINT O' WOODS COURT  
City-State-Zip: SPRING HILL FL 34606

Title D  
Name RITONIA, MARY  
Address 2152 FORESTER WAY  
City-State-Zip: SPRING HILL FL 34606

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BONNIE SMITH

**PRESIDENT**

**03/20/2013**

Electronic Signature of Signing Officer/Director Detail

Date