

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13023

Entity Name: PINE LAKE ESTATES PROPERTY OWNERS ASSOCIATION, INC.**FILED**
Feb 08, 2021
Secretary of State
4094759609CC**Current Principal Place of Business:**7450 PINE LAKE CIRCLE
MILTON, FL 32570**Current Mailing Address:**7450 PINE LAKE CIRCLE
MILTON, FL 32570**FEI Number: 59-2638420****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DOLAN, JOHN P
7460 PINE LAKE CIRCLE
MILTON, FL 32570 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 P
Name LELAND, JAMES
Address 7450 PINE LAKE CIRCLE
City-State-Zip: MILTON FL 32570Title VP
Name DOLAN, JOHN P
Address 7460 PINE LAKE DR
City-State-Zip: MILTON FL 32570Title T
Name DOLAN, DAWNA
Address 7460 PINE LAKE DR
City-State-Zip: MILTON FL 32570Title S
Name DOLAN, DAWNA
Address 7460 PINE LAKE CIR
City-State-Zip: MILTON FL 32570Title D
Name CONE, STEPHEN
Address 7576 BOWERS DR
City-State-Zip: MILTON FL 32570Title D
Name NESENSEN, RALPH
Address 7443 FOREST WOOD
City-State-Zip: MILTON FL 32570Title DIRECTOR
Name PICKETT, MICHAEL
Address 7434 PINE LAKE CIRCLE
City-State-Zip: MILTON FL 32570

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: JAMES LELAND**P****02/08/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date