2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2013
Secretary of State
CC5988598015

DOCUMENT# N48226

Entity Name: PINES MOBILE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1005 N. WHITEHURST RD.
LOT OFFICE
PLANT CITY, FL 33563

Current Mailing Address:

1005 N. WHITEHURST RD.
LOT OFFICE
PLANT CITY, FL 33563 US

FEI Number: 59-3126624

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ROLFE, DONNA
1005 N. WHITEHURST RD
LOT OFFICE
PLANT CITY, FL 33563 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	T
Name	DRUMHELLER, DONNA
Address	1005 N. WHITEHURST RD. #23
City-State-Zip:	PLANT CITY FL 33563

Title	P
Name	BOUTWELL, FREDDIE
Address	1005 N. WHITEHURST RD. #14
City-State-Zip:	PLANT CITY FL 33563

Title	VP
Name	WALTON, JANICE
Address	1005 N. WHITEHURST RD #21
City-State-Zip:	PLANT CITY FL 33563

Title	D
Name	CRESS, JOHN
Address	1005 N. WHITEHURST RD #10
City-State-Zip:	PLANT CITY FL 33563

Title	D
Name	BAKER, SHIRLEY
Address	1005 N. WHITEHURST RD #16
City-State-Zip:	PLANT CITY FL 33563

Title	S
Name	PREVETT, JIM
Address	1005 N. WHITENURST ROAD #28
City-State-Zip:	PLANT CITY FL 33563

Title	D
Name	ATHERTON, PAT
Address	1005 N. WHITEHURST RD. # 35
City-State-Zip:	PLANT CITY FL 33563

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: FREDDIE BOUTWELL PRESIDENT 01/18/2013

Electronic Signature of Signing Officer/Director Detail — Date