

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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	S, SECRETARY
Name	DRUMHELLER, DONNA
Address	1005 N. WHITEHURST RD. LOT OFFICE
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	TREASURER
Name	SCALF, ELIZABETH
Address	1005 N. WHITEHURST RD. LOT OFFICE
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

Title	DIRECTOR
Name	BOUTWELL, FREDDIE
Address	1005 N. WHITEHURST RD. LOT OFFICE
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	PRESIDENT
Name	PREVETT, JIM
Address	1005 N. WHITEHURST RD. LOT OFFICE
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: JIM PREVETT**PRESIDENT****01/13/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date