

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003446

Entity Name: BURNT PINE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550**Current Mailing Address:**215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US**FEI Number:** 59-3203703**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BURKE BLUE HUTCHISON WALTERS & SMITH, P.A.
195 GRAND BLVD
SUITE 101
MIRAMAR BEACH, FL 32550 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 DVPT
Name STOWE, MARILYN
Address 215 GRAND BLVD SUITE 200
City-State-Zip: MIRAMAR BEACH FL 32550Title DP
Name STEWART, JO
Address 215 GRAND BLVD SUITE 200
City-State-Zip: MIRAMAR BEACH FL 32550Title D
Name STICKNEY, THOMAS
Address 215 GRAND BLVD SUITE 200
City-State-Zip: MIRAMAR BEACH FL 32550Title DS
Name GANGER, JOANNE
Address 215 GRAND BLVD SUITE 200
City-State-Zip: MIRAMAR BEACH FL 32550Title D
Name WARTON, TODD
Address 215 GRAND BLVD SUITE 200
City-State-Zip: MIRAMAR BEACH FL 32550Title D
Name RUSSELL, JOHN
Address 215 GRAND BLVD
SUITE 200
City-State-Zip: MIRAMAR BEACH FL 32550Title D
Name CLARKE, ROBERT D
Address 215 GRAND BLVD
SUITE 200
City-State-Zip: MIRAMAR BEACH FL 32550

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: JO STEWART

PRESIDENT

02/08/2013

Electronic Signature of Signing Officer/Director Detail_____
Date