

2016 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.
221 MCKENZIE AVENUE
PANAMA CITY, FL 32401 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	PRESIDENT
Name	STEWART, JO
Address	215 GRAND BLVD SUITE 200
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	DIRECTOR
Name	GANGER, JOANNE
Address	215 GRAND BLVD SUITE 200
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	TREASURER
Name	RUSSELL, JOHN
Address	215 GRAND BLVD SUITE 200
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	DIRECTOR
Name	CLARKE, ROBERT
Address	215 GRAND BLVD SUITE 200
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	VP
Name	GLAZE, ROBERT
Address	215 GRAND BLVD SUITE 200
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	DIRECTOR
Name	HAYES, ART
Address	215 GRAND BLVD SUITE 200
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	SECRETARY
Name	CRANE, DONALD
Address	215 GRAND BLVD SUITE 200
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	DIRECTOR
Name	DEEMS, GEORGE
Address	215 GRAND BLVD SUITE 200
City-State-Zip:	MIRAMAR BEACH FL 32550

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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****02/12/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	YOUNG, J
Address	215 GRAND BLVD SUITE 200
City-State-Zip:	MIRAMAR BEACH FL 32550