2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2017
Secretary of State
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Entity Name: ALDEN PINES HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

14318 CLUBHOUSE DR
BOKEELIA, FL 33922

Current Mailing Address:

PO BOX 244
BOKEELIA, FL 33922 US

FEI Number: 65-0655358

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NELSON, LESTER
14318 CLUBHOUSE DR
BOKEELIA, FL 33922 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: LESTER NELSON 03/01/2017

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	LYLE, JAMES
Address	14350 TAMARAC DR
City-State-Zip:	BOKEELIA FL 33922

Title	DIRECTOR
Name	SANDERS, MITZI
Address	14271 SANDARAC
City-State-Zip:	BOKEELIA FL 33922

Title	DIRECTOR
Name	SHANLEY, HELEN
Address	14409 CLUBHOUSE DR
City-State-Zip:	BOKEELIA FL 33922

Title	DIRECTOR
Name	HEMBROOK, JEFF
Address	14421 CLUBHOUSE DR
City-State-Zip:	BOKEELIA FL 33922

Title	TREASURER
Name	NELSON, LES
Address	7791 GRANDE PINE RD
City-State-Zip:	BOKEELIA FL 33922

Title	SECRETARY
Name	WINNICKER, MELANIE
Address	14318 CLUBHOUSE DR
City-State-Zip:	BOKEELIA FL 33922

Title	DIRECTOR
Name	REASONER, WILLIAM C JR.
Address	14355 CLUBHOUSE DR
City-State-Zip:	BOKEELIA FL 33922

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: LESTER NELSON TREASURER 03/01/2017

Electronic Signature of Signing Officer/Director Detail — Date