2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N99000004187

Entity Name: PINELOCH HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2582 S. MAGUIRE ROAD
SUITE 318
OCOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

PO BOX 783367
WINTER GARDEN, FL 34778

New Mailing Address:

FEI Number: 59-3570971 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOLOMON, SPENCER R.
14443 PRUNNING WOOD PLACE
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: GABOY, DENISE
Address: 11506 PINELOCH LOOP
City-St-Zip: CLERMONT, FL 34711

Title: PD ( ) Delete
Name: MCCARTHY, PETE
Address: 11619 PINELOCH LOOP
City-St-Zip: CLERMONT, FL 34711

Title: SD ( ) Delete
Name: BAKER, VIVIAN
Address: 11716 PINELOCH LOOP
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete
Name: FLEISCHMAN, BRIAN
Address: 11628 PINELOCH LOOP
City-St-Zip: CLERMONT, FL 34711

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: BRASHER, BILL
Address: 11723 PINELOCH LOOP
City-St-Zip: CLERMONT, FL 34711

Title: SD (X) Change ( ) Addition
Name: MCCARTHY, PETE
Address: 11619 PINELOCH LOOP
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Change ( ) Addition
Name: BAKER, VIVIAN
Address: 11716 PINELOCH LOOP
City-St-Zip: CLERMONT, FL 34711

Title: PD (X) Change ( ) Addition
Name: FLEISCHMAN, BRIAN
Address: 11628 PINELOCH LOOP
City-St-Zip: CLERMONT, FL 34711

Title: TD ( ) Change (X) Addition
Name: MORIARTY, BRENDAN
Address: 11623 PINELOCH LOOP
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SPENCER SOLOMON RA 04/15/2009

Electronic Signature of Signing Officer or Director — Date