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Jan 30 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 708705 (9)

1. Corporation Name

PINE DRIVE MANOR ASSOCIATION, INC.



Principal Place of Business

Mailing Address

1100 PINE DRIVE
POMPANO BEACH FL 33060

1100 PINE DRIVE
POMPANO BEACH FL 33060-7478

3. Date Incorporated or Qualified
03/26/1965

3a. Date of Last Report
02/07/1996

4. FEI Number
59-1147799

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARTIN, ALBERT
1100 PINE DR.
UNIT 207
POMPANO BEACH FL 33060

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME MARTIN, ALBERT
STREET ADDRESS 1100 PINE DR., UNIT 207
CITY-ST-ZIP POMPANO BEACH FL 33060

1.1 TITLE Change Addition
1.2 NAME P.
1.3 STREET ADDRESS John Lo Presti
1.4 CITY-ST-ZIP 1100 Pine Dr. #205
Pompano Beach, FL. 33060 Change Addition

TITLE VPD DELETE
NAME LOPRESTI, JOHN
STREET ADDRESS 1100 PINE DRIVE UNIT 205
CITY-ST-ZIP POMPANO BEACH FL

2.1 TITLE Change Addition
2.2 NAME V.
2.3 STREET ADDRESS Joseph Fuzia
2.4 CITY-ST-ZIP 110 Pine Dr. #201 Pompano Beach, FL.

TITLE D DELETE
NAME KEFFEL, PETER
STREET ADDRESS 1100 PINE DRIVE UNIT 206
CITY-ST-ZIP POMPANO BEACH FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D DELETE
NAME JUDY, ROGER
STREET ADDRESS 1100 PINE DR., UNIT 103
CITY-ST-ZIP POMPANO BEACH FL 33060

4.1 TITLE Change Addition
4.2 NAME D
4.3 STREET ADDRESS Bernice Mullen
4.4 CITY-ST-ZIP 1100 Pine Dr. #204
Pompano Beach, FL. 33060

TITLE D DELETE
NAME FUZIO, JOSEPH
STREET ADDRESS 1100 PINE DRIVE UNIT 201
CITY-ST-ZIP POMPANO BEACH FL

5.1 TITLE Change Addition
5.2 NAME D.
5.3 STREET ADDRESS Albert Martin
5.4 CITY-ST-ZIP 1100 Pine Dr. #207
Pompano Beach, FL. 33060

TITLE D DELETE
NAME PFEIL, ROBERT
STREET ADDRESS 1100 PINE DR., UNIT 101
CITY-ST-ZIP POMPANO BEACH FL 33060

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *[Signature]*

John Lo Presti

1-22-97

CR2E037 (9/96)