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May 19 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 # **724892** **(5)**

1. Corporation Name

1004 PINE DRIVE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1004 PINE DRIVE POMPANO BEACH FL 33060	1004 PINE DRIVE POMPANO BEACH FL 33060-7477

3. Date Incorporated or Qualified: 11/29/1972
3a. Date of Last Report: 04/17/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-1578985 ☐ 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

9. Name and Address of Current Registered Agent

CONLEY, EILEEN R
1004 PINE DR
POMPANO BEACH FL 33060

10. Name and Address of New Registered Agent

81 Name: CELINE L. DEERY
82 Street Address (P.O. Box Number is Not Acceptable): 1004 PINE DRIVE
83 POMPANO BCH
84 City: FL 33060 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: Celine L. Deery — DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☑ DELETE	1.1 TITLE	VICE PRESIDENT D	☐ Change ☑ Addition
NAME	MALERBA, JAMES		1.2 NAME	JOHN SLATTERY	
STREET ADDRESS	1004 PINE DRIVE		1.3 STREET ADDRESS	1004 PINE DR	
CITY-ST-ZIP	POMPANO BEACH FL 33060		1.4 CITY-ST-ZIP	POMPANO BCH FL 33060	
TITLE	D	☑ DELETE	2.1 TITLE	SECRETARY D	☐ Change ☑ Addition
NAME	SALZANO, MICHAEL		2.2 NAME	SALZANO MICHAEL	
STREET ADDRESS	1004 PINE DRIVE		2.3 STREET ADDRESS	1004 PINE DR	
CITY-ST-ZIP	POMPANO BEACH FL		2.4 CITY-ST-ZIP	POMPANO BCH FL 33060	
TITLE	D	☑ DELETE	3.1 TITLE	TREASURER D	☐ Change ☑ Addition
NAME	SHARKEY, WILLIAM		3.2 NAME	CELINE L. DEERY	
STREET ADDRESS	1004 PINE DRIVE		3.3 STREET ADDRESS	1004 PINE DR.	
CITY-ST-ZIP	POMPANO BEACH FL		3.4 CITY-ST-ZIP	POMPANO BCH FL 33060	
TITLE	STD	☑ DELETE	4.1 TITLE	PRESIDENT D	☐ Change ☑ Addition
NAME	CONLEY, EILEEN		4.2 NAME	COLLINS SHIRLEY W.	
STREET ADDRESS	1004 PINE DRIVE		4.3 STREET ADDRESS	1004 PINE DRIVE	
CITY-ST-ZIP	POMPANO BEACH FL		4.4 CITY-ST-ZIP	POMPANO BEACH FL 33060	
TITLE	VD	☑ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	KELLY, RICHARD		5.2 NAME		
STREET ADDRESS	1004 PINE DRIVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL		5.4 CITY-ST-ZIP		
TITLE	PD	☑ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	COLLINS, SHIRLEY W		6.2 NAME		
STREET ADDRESS	1004 PINE DRIVE		6.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL		6.4 CITY-ST-ZIP		

CR2E037 (9/96)

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: Celine L. Deery — Date — Daytime Phone # 0025265
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR