

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

3/

May 24, 2005 8:00 am
Secretary of State

03-31-2005 90049 031 ****61.25

DOCUMENT # 724892

1. Entity Name
1004 PINE DRIVE ASSOCIATION, INC.



Principal Place of Business
1004 PINE DRIVE
POMPANO BEACH, FL 33060

Mailing Address
1004 PINE DRIVE
POMPANO BEACH, FL 33060

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03272005 Chg-NP

CR2E037 (10/03)

4. FEI Number
59-1578985

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CACCAVIELLO, GARY
1004 PINE DR
UNIT 105
POMPANO BEACH, FL 33060

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME DUFFY, PAUL
STREET ADDRESS 1004 PINE DRIVE APT 102
CITY-ST-ZIP POMPANO BEACH, FL 33030 Pres.

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME CACCAVIELLO, GARY
STREET ADDRESS 1004 PINE DRIVE
CITY-ST-ZIP POMPANO BEACH, FL Board of directors

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME MILLER, MICHAEL
STREET ADDRESS 1004 PINE DRIVE
CITY-ST-ZIP POMPANO BEACH, FL 33060 Board of directors

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME SHARKEY, WILLIAM
STREET ADDRESS 1004 PINE DR. APT 103
CITY-ST-ZIP POMPANO BEACH, FL 33060 Sec.

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME Richard Kelly
STREET ADDRESS 1004 Pine Drive #101
CITY-ST-ZIP POMPANO BEACH, FL 33060 Treas.

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/05 9517460476