## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 730228

(4)

PINE VALLEY CONDOMINIUM ASSOCIATION INC.								
Principal Place of Business Mailing Address								
101 CLUBHOUSE BLVD. RR 1 101 CLUBHOUSE BLVD. RR 1 NEW SMYRNA BCH FL 32168 NEW SMYRNA BCH FL 32168						3. Date Incorporated or Qualified 07/16/1974		
ļ						4. FEI Number Applied For		
2. Principal Place of Business 2a. Mailing Address						59-1669287   Not Applicable		
21	26				5. Certificate of Status Desired \$8.75 Additional Fee Required			
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & State City & State				7. Is this nonprofit corporation a homeowners association?				
23 28						Yes No		
Zip			Country			8. This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30.  Yes No		
	9. Name and Address of Curren	1 Registered Agent		81 1	Name	10. Name and Address of New Registered Agent		
GILMORE, J.F.   547 BOTTLE BRUSH				82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
NEW SMYRNA BEACH FL 32168			Ī	83				
			ļ-	64 (	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 Age					eignature required			
12.	OFFICERS AND	D DIRECTORS  DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition		
TITLE NAME			1.1 111			E cyanife T voorgil		
STREET ADDRESS				1.2 NAME				
CITY-ST-ZIP	AIDM ALMINIA DALL SI			1.3 STREET ADDRESS 1.4 CITY - ST - ZIP				
TITLE			2.1 TIT		ir .	Change Addition		
NAME			2.2 NA					
STREET ADDRESS			2.3 STR		DRESS			
CITY-S1-ZIP	ANTICL CANADALA MOLL EL CANADA		2.4 Cfl		1			
TITLE			3.1 TIT			☐ Change ☐ Addition		
NAME	CODRINGTON, W. 3.21		3.2 NA	ME				
STREET ADDRESS			3.3 STF	EET AD	DRESS			
CITY-ST-ZIP	NEW SMYRNA BCH FL		3.4. C(1	Y-ST-				
TITLE	ROWE, WILLIAM 4.2		4.1 TIT			TANLEY A MOUDY Change Addition		
NAME			4. 2 NA			119 CLUANOUSE BLUD		
STREET ADDRESS			4.3 STR		Dress			
CITY-ST-ZIP	NEW SMYRNA BEACH FL	- Driese	4.4 CIT		IP .	NEW SMYANA BEACH FL 32168		
TITLE		DELETE	5.1 ¥ITL		l	Change Addition		
NAME			5.2 NA					
STREET ADDRESS				EET AD	1			
CITY-ST-ZIP				Y-ST-Z	IP	Change Addition		
NAME			6.1 TITE 6.2 NAM		1	CT Change CT Addition		
			6.2 NAM 6.3 STR		DDECC			
GINCEL MUUNESS			0.3 516	ILC I AU	Unicoo			

In hereby certify that the information supplied with this filling does not quality 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 tustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter on an attachment with an address.

SIGNATURE

W. W. ROBERTSON

3/20/98 904-427-8141

**FILED** 

Mar 30 1998 8:00am

Secretary of State

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