

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90169 048 ****61.25

DOCUMENT # 746054

1. Entity Name

PINE RIDGE III CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

343 PINE RIDGE CIRCLE
GREENACRES CITY FL 33463

Mailing Address

343 PINE RIDGE CIRCLE
GREENACRES CITY FL 33463

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-1963457

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

RAY, D. PASQUALE
330 D1 PINE RIDGE CIRCLE
GREENACRES FL 33463

Name

MICHAEL J. CARREIRA

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

331 B2 PINE RIDGE CIRCLE

City

GREENACRES

FL

Zip Code

33463

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

Michael J. Carreira PRESIDENT

2/21/07

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

| | | |
|----------------|--------------------------|--|
| TITLE | T | <input checked="" type="checkbox"/> Delete |
| NAME | CLASSON, ROBERT | |
| STREET ADDRESS | 340 B1 PINE RIDGE CIRCLE | |
| CITY-ST-ZIP | GREENACRES FL 33463 | |
| TITLE | V | <input checked="" type="checkbox"/> Delete |
| NAME | PASQUALE, RAY D | |
| STREET ADDRESS | 330 D1 PINE RIDGE CIRCLE | |
| CITY-ST-ZIP | GREENACRES FL 33463 | |
| TITLE | AT | <input checked="" type="checkbox"/> Delete |
| NAME | KARWELL, ESTELLE | |
| STREET ADDRESS | 306 D2 PINE RIDGE CIRCLE | |
| CITY-ST-ZIP | GREENACRES FL 33463 | |
| TITLE | S/D | <input checked="" type="checkbox"/> Delete |
| NAME | ENGLAND, WILLIAM | |
| STREET ADDRESS | 309 DL PINE RIDGE CIRCLE | |
| CITY-ST-ZIP | GREENACRES FL 33463 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|--------------------------|--|
| TITLE | P/D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MICHAEL J. CARREIRA | |
| STREET ADDRESS | 331 B2 PINE RIDGE CIRCLE | |
| CITY-ST-ZIP | GREENACRES, FL 33463 | |
| TITLE | V/D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BONNIE ZURINSKAS | |
| STREET ADDRESS | 322 B2 PINE RIDGE CIRCLE | |
| CITY-ST-ZIP | GREENACRES FL 33463 | |
| TITLE | T/D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | FRANK GAUTHIER | |
| STREET ADDRESS | 321 C1 PINE RIDGE CIRCLE | |
| CITY-ST-ZIP | GREENACRES, FL 33463 | |
| TITLE | S/D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | BARBARA REDMOND | |
| STREET ADDRESS | 341 C2 PINE RIDGE CIRCLE | |
| CITY-ST-ZIP | GREENACRES, FL 33463 | |
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | PAUL SHERIDAN | |
| STREET ADDRESS | 339 C1 PINE RIDGE CIRCLE | |
| CITY-ST-ZIP | GREENACRES, FL 33463 | |
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | FRANK HELIT | |
| STREET ADDRESS | 336 B1 PINE RIDGE CIRCLE | |
| CITY-ST-ZIP | GREENACRES FL 33463 | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

MICHAEL J. CARREIRA, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/07 561-967-1848

ATTACHMENT

Pine Ridge III Condominium Association, Inc.
343 Pine Ridge Circle
Greenacres, FL 33463

40067177

Document # 746054
2007 Not-For-Profit Corporation Annual Report (AR)

Additional Directors:

D
George Siler
319 A2 Pine Ridge Circle
Greenacres, FL 33463

D
William McGivern
326 D2 Pine Ridge Circle
Greenacres, FL 33463

D
Everett Turner
331 A2 Pine Ridge Circle
Greenacres, FL 33463