

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90178 019 ****61.25

DOCUMENT # 755990

1. Entity Name

PINE RIDGE SOUTH IV CONDOMINIUM ASSOCIATION, INC

Principal Place of Business

Mailing Address

400 PINE GLEN LANE
 LAKE WORTH FL 33463

400 PINE GLEN LANE
 LAKE WORTH FL 33463

C0047382



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2083894

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BACKER, KEITH F
136 E. BOCA RATON RD.
BOCA RATON FL 33432

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	VARGYAS, THERESA	429-B2 PINE GLEN LANE	LAKE WORTH FL 33463	<input type="checkbox"/>
T	SOCKETT, MARY H	430-B1 PINE GLEN LN.	LAKE WORTH FL 33463	<input type="checkbox"/>
S	DE ROSA, RICHARD	447-D PINE GLENN LN	LAKE WORTH FL 33463	<input checked="" type="checkbox"/>
D	RAAB, DONALD	449-D PINE GLEN LN.	LAKE WORTH FL 33463	<input checked="" type="checkbox"/>
D	POLAKOWSKI, ROSE	450-G PINE GLEN LN.	LAKE WORTH FL 33463	<input checked="" type="checkbox"/>
D	GILLIS, JOHN	413 C-2 PINE GLENN LN	LAKE WORTH FL 33463	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
D	Robert Gallagher	405-C1 Pine Glen Lane	LAKE WORTH FL 33463	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	Carl Chiarolanio	448-E Pine Glen Lane	LAKE WORTH FL 33463	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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

Mary Sockett Treasurer

Date

3/27/01

Daytime Phone #

561-439-0290

CR2E037 (10/00)