
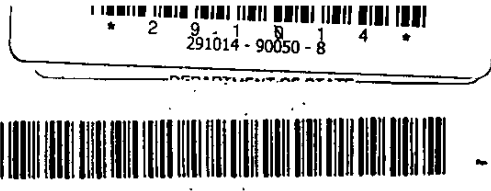


FILED
Mar 05, 1999 8:00 am
Secretary of State

03-05-1999 90052 033 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 758931 1. Corporation Name PINE RIDGE NORTH I CONDOMINIUM ASSOCIATION, INC.		
Principal Place of Business 500 SHADY PINE WAY WEST PALM BEACH FL 33415	Mailing Address 500 SHADY PINE WAY WEST PALM BEACH FL 33415	



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 06/26/1981
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-2153460
22. City & State	27. City & State	Applied For Not Applicable
23. Zip	28. Zip	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24. Country	29. Country	30. Country
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SICK, RUTH 526 A2 SHADY PINES WAY WEST PALM BEACH FL 33415	81 Name MR. Ken Direktor, Esq. 82 Street Address (P.O. Box Number is Not Acceptable) Becker & Poliakoff, P.A. 83 500 AUSTRALIAN AVE SOUTH, 9th Floor 84 West Palm Beach FL 85 Zip Code 33401

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: *Kenneth S. Direktor* DATE: 2/15/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	WTD D <input type="checkbox"/> DELETE	1.1 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUASTELLA, JOSEPH	1.2 NAME	<i>Joseph Guastella</i> D
STREET ADDRESS	520 B2 SHADY PINE WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	W PALM BEACH FL 33415	1.4 CITY-ST-ZIP	
TITLE	MD D <input type="checkbox"/> DELETE	2.1 TITLE	Vice-President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KLEIN, MARY JANE	2.2 NAME	
STREET ADDRESS	535 D-1 SHADY PINE WAY	2.3 STREET ADDRESS	D
CITY-ST-ZIP	WEST PALM BEACH FL 33415	2.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	POLLITZER, ERIC	3.2 NAME	D
STREET ADDRESS	536 B1 SHADY PINE WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33415	3.4 CITY-ST-ZIP	
TITLE	RD <input type="checkbox"/> DELETE	4.1 TITLE	MD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SICK, RUTH	4.2 NAME	
STREET ADDRESS	526 A2 SHADY PINE WAY	4.3 STREET ADDRESS	D
CITY-ST-ZIP	WEST PALM BEACH FL 33415	4.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	5.1 TITLE	Rotorod, Alpha <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROTOROD, ALBERT	5.2 NAME	
STREET ADDRESS	510 A 2 SHADY PINE WY	5.3 STREET ADDRESS	D
CITY-ST-ZIP	WEST PALM BEACH FL 33415	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, with all other like empowered.

SIGNATURE: *Kenneth S. Direktor* DATE: 1-8-99 DAYTIME PHONE #: (561) 964-9184

CR2E037 (11/98)