


FILE NOW: FILING FEE IS \$61.25

FILED

May 22 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N13683 (0)

1. Corporation Name
PINE RIDGE AT SUGAR CREEK VILLAGE I CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 4800 MILE STRETCH P O BOX 3370 HOLIDAY FL 34690 US	Mailing Address 4800 MILE STRETCH P O BOX 3370 HOLIDAY FL 34690 US
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3. Date Incorporated or Qualified
03/04/1986

4. FEI Number
65-0014689

Applied For	
Not Applicable	

2. Principal Place of Business 21 Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 25	29 30

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**REIMER, FREDERICK
4800 MILE STRETCH
HOLIDAY FL 34690**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME SUTCH, ARTHUR		1.2 NAME	Joseph Ribando
STREET ADDRESS 13128 CYPRESS HILL DRIVE B		1.3 STREET ADDRESS	13028 Cypress Hill Drive
CITY-ST-ZIP HUDSON FL		1.4 CITY-ST-ZIP	Hudson, FL
TITLE SD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME KAHAN, HENRIETTA		2.2 NAME	Gordon Rosser
STREET ADDRESS 13103 CYPRESS HILL DR E1		2.3 STREET ADDRESS	12200 Fox Chase Drive
CITY-ST-ZIP HUDSON FL		2.4 CITY-ST-ZIP	Hudson, FL
TITLE VD	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ROSSER, GORDON		3.2 NAME	Richard Parseghin
STREET ADDRESS 12200 FOX CHASE DR		3.3 STREET ADDRESS	12119 Sunny Glen Lane
CITY-ST-ZIP HUDSON FL		3.4 CITY-ST-ZIP	Hudson, FL
TITLE VD	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME BELFIELD, LESLIE		4.2 NAME	Al Frago
STREET ADDRESS 12218 FOX CHASE DR., D2		4.3 STREET ADDRESS	13103 Cypress Hill Drive
CITY-ST-ZIP HUDSON FL		4.4 CITY-ST-ZIP	Hudson, FL
TITLE TD	<input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PERSEGHIN, RICHARD		5.2 NAME	Art Sutch
STREET ADDRESS 12119 SUNY GLEN LANE, D1		5.3 STREET ADDRESS	13128 Cypress Hill Drive
CITY-ST-ZIP HUDSON FL		5.4 CITY-ST-ZIP	Hudson, FL
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Joseph Ribando
1.3 STREET ADDRESS	13028 Cypress Hill Drive
1.4 CITY-ST-ZIP	Hudson, FL
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Gordon Rosser
2.3 STREET ADDRESS	12200 Fox Chase Drive
2.4 CITY-ST-ZIP	Hudson, FL
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Richard Parseghin
3.3 STREET ADDRESS	12119 Sunny Glen Lane
3.4 CITY-ST-ZIP	Hudson, FL
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Al Frago
4.3 STREET ADDRESS	13103 Cypress Hill Drive
4.4 CITY-ST-ZIP	Hudson, FL
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Art Sutch
5.3 STREET ADDRESS	13128 Cypress Hill Drive
5.4 CITY-ST-ZIP	Hudson, FL
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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)(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 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.

SIGNATURE *Joseph Ribando* DATE *4-24-98*

CR2E037 (1097)