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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**SIGNATURE:** 

N41847 DOCUMENT #

(7)

PINE AVENUE CAR CARE CENTER CONDOMINIUM ASSOCIAT ION, INC.

	isiness	Mailing Address						
101 NE 1ST AVEEN	IUE	2603 SE 17TH ST.						
OCALA FL 32670		SUITE B			1			
		OCALA FL 34471 US			3. Date Incorporated or Qualified 01/29/1991	3a. Date of Last 02/06/19	Report <b>995</b>	
Dringing Disco of	I Puninger	2a. Mailing Address			4. FEI Number		Applied For	
2. Principal Place of Business		h-n "	26. Walking Adoless		59-3111120	<del> </del>	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			f C Waster of Out to Decided	_ \$8.75	Additional	
Guite, Apr. 4. etc.		27	<del>  -  </del>		Certificate of Status Desired	Fee	Required	
City & State		City & State			6. Election Campaign Financing	□ \$5.0	O May Be	
		28			Trust Fund Contribution	Adde	d to Fees	
Zip	Country	Z <sub>i</sub> p	Country		8. This corporation has liability for in	tangible tax under s. I Yes □ No	199.032,	
	25		30		Florida Statutes L  10. Name and Address of New Re			
9.	Name and Address of	Current Registered Agent	81	Name	10. Hattle and Address of Herr Flo	gistorea rigeric	. ***	
	1011110		Ľ					
Rudnianyn, John S. 101 n.e. 1st avenue			62	Street Address (P.O. Box Number is Not Acceptable)				
			83					
OCALA FL 32	20/0							
			84	City		FL  85   Zi	p Code	
		17 0500 and 617 1509. Florida Statutos	the above.	named corro	ration submits this statement for the purp	ose of changing its	egistered offi	
<ul> <li>or registered ac</li> </ul>	ent, or both, in the State	of Florida. Such change was authorized of, Section 617.0503, Florida Statutes.	by the con	oration's boa	ard of directors. I hereby accept the appo	intment as registered	l agent. I am	
	id accept the obligations of	or, dection of 1,0300, 1 londa claidics.						
GNATURE Signate	ure, typed or printed name of registe	3103 380 4 4 10 411 1 1 1 1 1 1 1 1 1 1 1 1 1 1		nt signature requir	ed when reinstating) ADD/TIONS/CHANGES TO OFFI	DATE	NOS INL 10	
2.	OFFICE	RS AND DIRECTORS	13.			JEBS AND DINEVIL	או אוו כישר	
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR