

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766658

FILED
Apr 13, 2009
Secretary of State

Entity Name: PINE RIDGE NORTH VILLAGE III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

700 SUNNY PINE WAY
W. PALM BCH., FL 33415 US

New Principal Place of Business:

Current Mailing Address:

700 SUNNY PINE WAY
W. PALM BCH., FL 33415

New Mailing Address:

FEI Number: 59-2318325

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLEY & WYANT-CORTEZ, P.A.
860 U S HWY ONE
STE 108
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANTHONY, JENNETTE
Address: 727 B SUNNY PINE WAY
City-St-Zip: WEST PALM BEACH, FL 33415

Title: SE () Delete
Name: PATROCOLA, FRANK
Address: 728 SUNNY PINE WAY #2
City-St-Zip: GREENACRES, FL 33415

Title: VPD () Delete
Name: FRANCES, CARUSO
Address: 728 SUNNY PINELAND B1
City-St-Zip: GREENACRES, FL 33415

Title: VPD () Delete
Name: FERRARA, ANTHONY
Address: 705 E. SUNNY PINE WAY
City-St-Zip: WEST PALM BEACH, FL 33415

Title: D () Delete
Name: PARISE, FERDINAND J
Address: 722 SUNNY PINE WAY G-1
City-St-Zip: GREENACRES, FL 33415

Title: T (X) Delete
Name: PARISE, FERDINAND
Address: 723 G1 SUNNY PINE WAY
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: PATROCOLA, FRANK
Address: 728 SUNNY PINE WAY #2
City-St-Zip: GREENACRES, FL 33415

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: COLLEGIO, ELLEN
Address: 712 SUNNY PINE WAY APT G1
City-St-Zip: GREENACRES, FL 33415

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY JENNETTE

PRES

04/13/2009

Electronic Signature of Signing Officer or Director

Date