

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725881

Entity Name: PINE ISLAND RIDGE CONDOMINIUM F ASSOCIATION, INC.**Current Principal Place of Business:**9420 LIVE OAK PLACE
DAVIE, FL 33324**Current Mailing Address:**18001 OLD CUTLER RD SUITE 476
PALMETTO BAY, FL 33157 US**FEI Number:** 59-1594729**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BAKALAR & ASSOCIATES, P.A.
12472 W ATLANTIC BLVD
CORAL SPRINGS, FL 33071 US*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:** MICHAEL BAKALAR

04/13/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name HOLTUEUR, RICHARD
Address 9420 LIVE OAK PLACE
City-State-Zip: DAVIE FL 33324

Title VP
Name KARAN, ALI C
Address 9420 LIVE OAK PLACE
City-State-Zip: DAVIE FL 33324

Title DIRECTOR
Name KUSHNER, LYNNE
Address 9420 LIVE OAK PLACE
City-State-Zip: DAVIE FL 33324

Title SECRETARY
Name LOPEZ-MUNIZ, IVAN
Address 9420 LIVE OAK PLACE
City-State-Zip: DAVIE FL 33324

Title TREASURER
Name HAMILTON, WILLIAM G
Address 9420 LIVE OAK PLACE
City-State-Zip: DAVIE FL 33324

Title ASST. TREASURER
Name REHSEDE TOLDEDO PIZA, KATHRIN
Address 9420 LIVE OAK PLACE
City-State-Zip: DAVIE FL 33324

Title DIRECTOR
Name CASAS, MARCO
Address 9420 LIVE OAK PLACE
City-State-Zip: DAVIE FL 33324

Title DIRECTOR
Name TRIPANI, CHRISTOPHER
Address 9420 LIVE OAK PLACE
City-State-Zip: DAVIE FL 33324

I hereby 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 all other like empowered.

SIGNATURE: RICHARD HOLTUEUR

PRESIDENT

04/13/2022

Electronic Signature of Signing Officer/Director Detail

Date