

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 725958

**Entity Name:** PINE ISLAND RIDGE CONDOMINIUM A ASSOCIATION, INC.

**Current Principal Place of Business:**

9435 EVERGREEN PLACE  
DAVIE, FL 33324

**Current Mailing Address:**

9435 EVERGREEN PLACE  
DAVIE, FL 33324

**FEI Number: 59-1641602**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

JEROME SCHECHTER, P.A.  
1995 E. OAKLAND PARK BLVD.  
SUITE 210  
FORT LAUDERDALE, FL 33306 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DIRECTOR, VP  
Name           GOLDEN, L  
Address        9435 EVERGREEN PLACE  
City-State-Zip: DAVIE FL 33324

Title           DS  
Name           GRECO, LINDA  
Address        9435 EVERGREEN PL.  
City-State-Zip: DAVIE FL 33324

Title           D  
Name           SMITH, BETTY  
Address        9435 EVERGREEN PLACE  
City-State-Zip: DAVIE FL 33324

Title           D  
Name           WATTS, ED  
Address        9435 EVERGREEN PLACE  
City-State-Zip: DAVIE FL 33324

Title           DIRECTOR  
Name           BIRKEN, JERRY  
Address        9435 EVERGREEN 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: L. GOLDEN**

**VP**

**04/21/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date