

2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 758931

Entity Name: PINE RIDGE NORTH I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

500 SHADY PINE WAY
WEST PALM BEACH, FL 33415

Current Mailing Address:

500 SHADY PINE WAY
WEST PALM BEACH, FL 33415

FEI Number: 59-2153460

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PROPERTY MANAGEMENT RESOURCES
4000 S.57TH AVE
#101
LAKE WORTH, FL 33463 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 TD
Name THOMAS, ARTHUR
Address 539 SHADY PINE WAY C2
City-State-Zip: WEST PALM BEACH FL 33415

Title DIRECTOR
Name WIBBLE, JEAN
Address 530 SHADY PINE WAY C1
City-State-Zip: WEST PALM BEACH FL 33415

Title PD
Name GRASSIE, GLORIA
Address 531 B-1 SHADY PINE WAY
City-State-Zip: WEST PALM BEACH FL 33415

Title SD
Name NOTTINGHAM, JEANETTE
Address 527 A-1 SHADY PINE WAY
City-State-Zip: WEST PALM BEACH FL 33415

Title DIRECTOR
Name ESPINO, LUIS
Address 520 SHADY PINE WAY D2
City-State-Zip: WEEST PALM BEACH FL 33467

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: GLORIA GRASSIE

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05/29/2013

Electronic Signature of Signing Officer/Director Detail

_____ Date