## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07298

Entity Name: PINE RIDGE AT LAKE TARPON VILLAGE III CONDOMINIUM

ASSOCIATION, INC.

## **Current Principal Place of Business:**

720 BROOKER CREEK BLVD.

SUITE 206

OLDSMAR, FL 34677

## **Current Mailing Address:**

720 BROOKER CREEK BLVD. SUITE 206 OLDSMAR, FL 34677 US

FEI Number: 59-2534830 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SCANNAVINO, INC. 720 BROOKER CREEK BLVD. SUITE 206 OLDSMAR, FL 34677 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: DOMINICK SCANNAVINO 01/13/2020

> Date Electronic Signature of Registered Agent

> > City-State-Zip:

OLDSMAR FL 34677

Officer/Director Detail:

Title Title VPD

COFFEY, GAIL CLARK, LENNIE Name Name

Address 720 BROOKER CREEK BLVD. Address 720 BROOKER CREEK BLVD.

SUITE 206 SUITE 206

City-State-Zip: OLDSMAR FL 34677 OLDSMAR FL 34677 City-State-Zip:

**SECRETARY** Title Title LOGUE, TRAVIS RILEY, MARCIA Name Name

720 BROOKER CREEK BLVD. Address 720 BROOKER CREEK BLVD. Address

SUITE 206 SUITE 206

Title **DIRECTOR** 

GALTO, RAY Name

> 720 BROOKER CREEK BLVD. SUITE 206

OLDSMAR FL 34677

City-State-Zip:

Address

City-State-Zip: OLDSMAR FL 34677

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.

01/13/2020 SIGNATURE: GAIL COFFEY PRESIDENT

**FILED** Jan 13, 2020

Secretary of State

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