2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED Apr 24, 2000 8:00 am Secretary of State DOCUMENT # **725959** 1. Entity Name PINE ISLAND RIDGE CONDOMINIUM A-1 ASSOCIATION, I 04-24-2000 90039 042 ****61.25 Mailing Address Principal Place of Business 9485 EVERGREEN PLACE 9485 EVERGREEN PLACE FT LAUDERDALE FL 33324 FT LAUDERDALE FL 33324-4300 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1641609 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LEVIN, CHERYL E 10226 NW 47TH ST 3500 N STATE RD 7, #333 Zip Code City FL SUNRISE FL 33351 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. Delete ☐ Addition TITLE ☐ Change TITLE LEVENSON, SIDNEY NAME NAME STREET ADDRESS 9481 EVERGRÉEN PL 403 < STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT-L'AUDERDALE FL ☐ Addition Delete □ Change TITLE TITLE CAPO, DORIS NAME NAME STREET ADDRESS STREET ADDRESS 9491 EVERGREEN PL, 104 CITY-ST-ZIP CITY-ST-ZIP FT LAUDEDALE FL M) ☐ Change ☐ Addition TITLE Delete TITLE NAME BARASCH, HOWARD NAME STREET ADDRESS STREET ADDRESS 9491 EVERGREN PL 108 FT. LAUDERDALE FL CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition D ☐ Delete TITLE TITLE NAME NAME KLEIN, SHIRLEY STREET ADDRESS 9471 EVERGREEN PL, 305 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL Change ☐ Addition TITLE Delete TITLE KANAPLUE, LARRY NAME NAME STREET ADDRESS STREET ADDRESS 9481 EVERGREEN PL. #107 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33324 ☐ Addition ☐ Change TITLE Delete TITLE DREXLER, ROSLYN NAME NAME STREET ADDRESS STREET ADDRESS 9481 EVERGREEN PL., #102 CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL 33324 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if of the corporation or the receive changed, or on an attachment