

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2003 8:00 am
Secretary of State

02-12-2003 90091 027 ****61.25

DOCUMENT # 728446

1. Entity Name

PINE ISLAND RIDGE CONDOMINIUM B ASSOCIATION, INC



Principal Place of Business

**9430 A TANGERINE PL
FT LAUDERDALE FL 33324**

Mailing Address

**9430 A TANGERINE PL
FT LAUDERDALE FL 33324**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1838717**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KAYE & ROGER, P.A.
6261 NW 6TH WAY STE 103
FORT LAUDERDALE FL 33309**

7. Name and Address of New Registered Agent

Name

RANDALL K. ROGER & ASSOCIATES, P.A.

Street Address (P.O. Box Number is Not Acceptable)

621 NW 53rd Street, Suite 300

Boca Raton, FL 33487

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

RANDALL K. ROGER & ASSOCIATES, P.A.

2/6/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	TURNER, ERIC	
STREET ADDRESS	9460 TANGERINE PL	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MCDONLAD, ALEX	
STREET ADDRESS	9410 TANGERINE PL	
CITY-ST-ZIP	FORT LAUDERDALE FL 33324	
TITLE	P	<input type="checkbox"/> Delete
NAME	JUDA, ALAN	
STREET ADDRESS	9470 TANGERINE PLACE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33324	
TITLE	D	<input type="checkbox"/> Delete
NAME	BERGERON, DOROTHY	
STREET ADDRESS	9420 TANGERINE PLACE	
CITY-ST-ZIP	FT LAUDERDALE FL 33324	
TITLE	D	<input type="checkbox"/> Delete
NAME	TURNER, AL	
STREET ADDRESS	9440 TANGERINE PLACE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33324	
TITLE	S	<input type="checkbox"/> Delete
NAME	LIFRIERI, LOUISE	
STREET ADDRESS	9420 TANGERINE PLACE	
CITY-ST-ZIP	FORT LAUDERDALE FL 33324	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WEST, MARION	
STREET ADDRESS	9440 Tangerine Place	
CITY-ST-ZIP	Ft. Lauderdale, FL 33324	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Alex M. Donald

954-473-1193

CR2E037 (10/02)