

FILE NOW: FILING FEE IS \$61.25

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Apr 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **733844** (5)

1. Corporation Name

PINE POINT VILLAS ASSOCIATION, INC.

Principal Place of Business 3310 LOREN ROAD BOYNTON BEACH FL 33435-8578	Mailing Address 3310 LOREN ROAD BOYNTON BEACH FL 33435-8578
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3. Date Incorporated or Qualified

09/17/1975

4. FEI Number

59-1591216

Applied For
Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KLINE, CHARLES F
831 NORTH DIXIE HWY
LAKE WORTH FL 33460**

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MC DANIEL, HARRY P. 220-A BAYVIEW AVE. BOYNTON BCH. FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PD DRAGO, MARY 3330-C LOREN RD. BOYNTON BEACH, FL. 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DRAGO, MARY 3330-C LOREN RD BOYNTON BCH. FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	VPD DIEHL, HARRY 3220-B RIDGE HILL RD. BOYNTON BEACH, FL. 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ABBONDANDOLO, MARIE 311-D PINE POINT DR. BOYNTON BCH. FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	SD HARTMAN, BERNICE L. 3330-C POST RD. BOYNTON BEACH, FL. 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ABUSO, MARIE 3331-D LOREN RD BOYNTON BCH. FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	SD MACIOLEK, ANIELA 221-C PINE POINT DRIVE BOYNTON BEACH, FL. 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATD MACIOLE, ANIELA 221-C PINE POINT DR BOYNTON BEACH FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	D MACIOLEK, ANIELA 221-C PINE POINT DRIVE BOYNTON BEACH, FL. 33435
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD SMITH, ALLYN F 3311-A VALLEY RD. BOYNTON BEACH FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	D PERRUCCIO, JOSEPH 3230-D PARK LANE BOYNTON BEACH, FL. 33435

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Max Drago REQUIRED

3/25/98

561 585-3780

CR2E037 (10/97)