

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 744719

1. Entity Name

THE PINES OF DELRAY NORTH ASSOCIATION, INC.

Principal Place of Business

1431 NW 18TH AVE
DELRAY BCH FL 33445

Mailing Address

1431 NW 18TH AVE.
CB #100
DELRAY BEACH FL 33445
US

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

59-1886546

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GREENWALD, STEVEN I.
6971 N FEDERAL HWY STE 105
BOCA RATON FL 33487

7. Name and Address of New Registered Agent

Name

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

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.

SIGNATURE

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
Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME ISRAEL, SHIRLEY
STREET ADDRESS 1361 NW 19TH TERRACE, #104
CITY-ST-ZIP DELRAY BCH FL

TITLE VDTD ☐ Delete
NAME PERCIA, JOHN
STREET ADDRESS 1835 NW 18TH ST., #101
CITY-ST-ZIP DELRAY BEACH FL

TITLE SD ☐ Delete
NAME JACOBS, MONROE
STREET ADDRESS 1420 NW 18TH AVE., #104
CITY-ST-ZIP DELRAY BEACH FL

TITLE T ☒ Delete
NAME CASSILLO, DORIS
STREET ADDRESS 1540 NW 18TH AVE. #102
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Change ☒ Addition
NAME ENGLISH, GEORGE
STREET ADDRESS 1721 NW 19TH TERRACE, #C
CITY-ST-ZIP DELRAY BEACH, FL 33445

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: *Shirley Israel* Shirley Israel 4/06/01 561-278-1212

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 09, 2001 8:00 am
Secretary of State

04-09-2001 90015 018 ****61.25



DO NOT WRITE IN THIS SPACE

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CR2E037 (10/00)