## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Apr 16, 2004 8:00 am Secretary of State **DOCUMENT #748729** 04-16-2004 90110 020 \*\*\*\*61.25 PINE RIDGE IV CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 3591 PINE NEEDLE 3591 PINE NEEDLE LAKE WORTH, FL 33463 LAKE WORTH, FL 33463 3. Maiting Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 04062004 CR2E037 (10/03) Chg-NP Applied For City & State City & State 4. FEI Number 59-2001903 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required \_7. Name and Address of New Registered Agent. \_\_\_\_6. Name and Address of Current Registered Agent \_\_\_ SCALISE, FRANK Street Address (P.O. Box Number is Not Acceptable) 5861 WHISPERING PINE WAY 418 B2 GREEN ACRES, FL 33463 City 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 Stonature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature regured when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due by May 1, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE ☐ Delete TITLE ☐ Change ■ Addition marie Cuitlinski 5830 Whispering Pine Way Greenauros, Fl. 33463 SCALISE, FRANK NAME NAME 5861 WHISPERING PINE WAY 418-B2 STREET ADDRESS STREET ADDRESS GREEENACRES, FL 33463 CITY-ST-ZIP CITY-ST-ZIP not deleted D TITLE Delete TITLE ☐ Change ☐ Addition MARTINO, ANGELO NAME NAME 5990 WHISPERING PINE WAY 409-B1 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GREENACRES, FL 33463 CHY-ST-ZP Bot meyer pur Court TITLE Delete -TITLE --☐ Change ☐ Addition BURKE, MARY NAME NAME 404-A1 5960 PINE COVE CT 403-C1 STREET ADDRESS STREET ADDRESS reenacres Pl. 33063 GREENACRES, FL 33463 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition RADZIWANOWSKI, ANN NAME NAME 3531 TALL PINE WAY STREET ADDRESS STREET ADDRESS LAKE WORTH, FL 33463 CITY-ST-ZIP CITY-ST-ZIP THTLE VΡ ☐ Delete TITLE ☐ Change Addition MANNIX, DAN NAME NAME STREET ADDRESS 5861 WHISPERING PINE WAY 405-B2 STREET ADDRESS CITY-ST-ZIP GREENACRES, FL 33463 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition CORONATO, MIKE NAME NAME STREET ADDRESS 5861 WHISPERING PINE WAY STREET ADDRESS GREENACRES, FL 33463 CITY-ST-ZIP 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.

ara

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Daytime Phone #