FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

755990

(9)

PINE RIDGE SOUTH IV CONDOMINIUM ASSOCIATION, INC

B							
Principal Place of Business Mailing Address					1	Tal demit Arbeit Allie A	1017 0107) 100)
400 PINE GLEN LANE 400 PINE GLEN L LAKE WORTH FL 33463 LAKE WORTH FL			•				
					01/20/1981	Date of Last R 03/06/19	leport 96
· ·	Place of Business	2a. Mailing Address			4. FEI Number	Aŗ	pplied For
Suite, Apt. #, etc.		26				ot Applicable	
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing			
23 Zip	Country			,	Trust Fund Contribution		to Fees
24	25 29 30		Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
[24]	9. Name and Address of Currer		100	······································	10. Name and Address of New Register		
			81	Name	10.	Tou ngoin	
Fritts, robert							····
	KE WORTH ROAD, #4		82	Street	Address (P.O. Box Number is Not Acceptable)		
GREEN!		83				 	
OILLIN	101120 00107						
			84	City'		FL `	Code
office of i	to the provisions of Sections 617.050 registered agent, or both, in the State im familiar with, and accept the oblig	i of Florida. Such change was au	thorized by	/ the con	corporation submits this statement for the purpor poration's board of directors. I hereby accept the	se of changing it appointment as	ts registered registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:	Bagislered Age	ent signature	required when reinstating) DA	TE	
12.		D DIRECTORS	13.	on Digitalia	ADDITIONS/CHANGES TO OFFICERS		3S IN 12
TITLE	P	DELETE	1.1 TITLE				Addition
NAME	GILLIS, JOHN		1.2 NAME				_
STREET ADDRESS	413 A2 PINE GLEN LANE		1.3 STREET	ADDRESS	448c Pinc Gled Lane		
CITY-ST-ZIP	LAKE WORTH, FL 00000		1.4 CITY - S	IT-ZIP	LAKE WORTH, FL 33463	5	
TITLE	VP	DELETE 2			N'S	Change	Addition
NAME	Gallagher, Robert		2.2 NAME				
STREET ADDRESS	405 C1 PINE GLEN LANE		2.3 STREET	ADDRESS	John J. FLANAGAN 419A2 Piwe diedlane		
CITY-ST-ZIP	LAKEWORTH FL		2. 4 CITY-5	ST-ZIP	LAKEWORTH, FL 33463		
TITLE	T	DELETE 3.1				☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADORESS			
CITY-ST-ZIP	LAKE WORTH FL		3.4. CITY-S	ST-ZIP			
TITLE	S	DELETE	4.1 TITLE			Change	Addition
NAME	Berg, Shirley		4. 2 NAME				
STREET ADDRESS	423 C2 PINE GLEN LANE		4.3 STREET ADDRESS				
CITY-ST-ZIP	LAKE WORTH, FL 00000		4.4 CITY - S	T-2 P			
TITLE	D	DELETE	5.1 TITLE			Change	Addition
NAME	rose, dunsky		5.2 NAME	!			
STREET ADDRESS	412 B2 PINE GLEN LANE		5.3 STREET	ADDRESS			
CITY-ST-ZIP	LAKE WORTH, FL 00000		5.4 CITY-S	T-ZIP			
TITLE	D	DELETE	6.1 TITLE		Dieccon	☐ Change	Addition
NAME	DORNIAK, CHARLES	RLES 6			Theresa VARAHAS		
STREET ADDRESS	430 B2 PINE GLEN LANE		6.3 STREET	address	Theresa VARGYAS 429-82 Piwe blow LN		
CITY-ST-ZIP	LAKE WORTH, FL 00000		6.4 CITY - S		LAKE WONTH, FL 33462		
14 I do herel	by certify that the information supplier	d with this filing does not qualify	for the eve	mation e	tated in Section 119 07(3)(i) Florida Statutos 1 tur	ther easify that	the

14. I do 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

Man gounts & Chi Manguen Te Ober

1-22-97

FILED

Mar 03 1997 8:00am

Secretary of State

Daytime Phone # 0043857