


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT



FILED
Jan 22, 2008 8:00 am
Secretary of State

01-22-2008 90068 012 ****61.25

DOCUMENT # 769509 1. Entity Name PINE RIDGE AT LAKE TARPON VILLAGE I CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1250 PINE RIDGE CIR E TARPON SPRINGS, FL 34688			Mailing Address 1250 PINE RIDGE CIR E TARPON SPRINGS, FL 34688		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2364216	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BECKER & POLIAKOFF, PA 2401 WESTBAY DR SUITE 414 LARGO, FL 33770-1941				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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD FITZGERALD, MARTHA 1100 PINE RIDGE CIRCLE W. #101A TARPON SPRINGS, FL 34688	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD KEEP, ALISON 1344 PINE RIDGE CIRCLE E #F1 TARPON SPRINGS, FL 34688	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD HEBBARD, DOUGLAS 1389 PINE RIDGE CIRCLE E. #130E TARPON SPRINGS, FL 34688	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GRIFFIN, MILO 1261 PINE RIDGE CIRCLE WEST #C2 TARPON SPRINGS, FL 34688	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GAMLIN, MARY 1380 PINE RIDGE CIRCLE E. #132 E TARPON SPRINGS, FL 34688	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NOLAND, STUART 1118 PINE RIDGE CIRCLE W. #E TARPON SPRINGS, FL 34688	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D AL ROBERTS 1151 PINE RIDGE CIRCLE W. #G2 TARPON SPRINGS FL 34688	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD NOLAND, STUART 1118 PINE RIDGE CIRCLE W. #E TARPON SPRINGS FL 34688	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <i>Milo Griffin</i> Milo Griffin President 1/18/08 727-932-9569 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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ATTACHMENT

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City & State Zip Country		City & State Zip Country		4. FEI Number 59-2364216 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				01032008 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent BECKER & POLIAKOFF, PA 2401 WESTBAY DR SUITE 414 LARGO, FL 33770-1941			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete D SAL PENOZO 1207 PINE RIDGE CIR W. #C1 TARPON SPRINGS FL 34688		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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SIGNATURE:  Milo Griffin <small>SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			1/18/08 <small>Date</small> 727-937-8569 <small>Daytime Phone #</small>		