

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# H05912

FILED  
Feb 25, 2002 8:00 AM  
Secretary of State

Entity Name: PINE ISLAND MANAGEMENT CORPORATION

## Current Principal Place of Business:

4 OCEAN PLACE  
HIGH BEACH, FL 33487 US

## New Principal Place of Business:

3720 SOUTH OCEAN BOULEVARD  
APT 1108  
HIGH BEACH, FL 33487 US

## Current Mailing Address:

4 OCEAN PLACE  
HIGH BEACH, FL 33487 US

## New Mailing Address:

3720 SOUTH OCEAN BOULEVARD  
APT 1108  
HIGH BEACH, FL 33487 US

FEI Number: 59-2425741

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REITMAN, FREDERIC, R, MD  
4 OCEAN PLACE  
HIGHLAND BEACH, FL 33487

## Name and Address of New Registered Agent:

REITMAN, FREDERIC R M.D.  
3720 SOUTH OCEAN BOULEVARD  
APT 1108  
HIGHLAND BEACH, FL 33487

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: FREDERIC R. REITMAN, M.D.

02/25/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: REITMAN, FREDERIC R.,  
Address: 4 OCEAN PLACE  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: STD ( ) Delete  
Name: REITMAN, BARBARA,  
Address: 4 OCEAN PLACE  
City-St-Zip: HIGHLAND BEACH, FL 33487

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: REITMAN, FREDERIC R M.D.  
Address: 3720 SO OCEAN BOULEVARD 1108  
City-St-Zip: HIGHLAND BEACH, FL 33487

Title: STD (X) Change ( ) Addition  
Name: REITMAN, BARBARA  
Address: 3720 SO OCEAN BOULEVARD 1108  
City-St-Zip: HIGHLAND BEACH, FL 33487

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FREDERIC R. REITMAN, M.D.

PD

02/25/2002

Electronic Signature of Signing Officer or Director

Date