

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Wanda B. McMan
Secretary of State
1900 PENNSYLVANIA AVENUE, SUITE 200
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
AND
FILED

95 MAY -1 AM 10:07

SECRETARY OF STATE
17 LINDA LEE, FLORIDA

DOCUMENT # **J77682** (9)

PINE RIDGE HOLDING GROUP, INC.

Principal Office Address:
2450 NORTH CITRUS HILLS BLVD.
HERNANDO FL 32642

Alternate Address:
2450 NORTH CITRUS HILLS BLVD
HERNANDO FL 32642

PLEASE WRITE IN THIS SPACE

3. Date of Incorporation or Reincorporation 06/15/1987	3a. Date of Last Report 03/21/1994
4. FFI Number 59-2813788	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. Does corporation have liability for retroactive tax under S. 1993(2) Florida Statute. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Office of Corporation	2a. Mailing Address
21. State of Incorporation	26. State of Mailing Address
22. State of Principal Office	27. State of Mailing Address
23. State of Principal Office	28. State of Mailing Address
24. State of Principal Office	29. State of Mailing Address
25. State of Principal Office	30. State of Mailing Address

9. Name and Address of Current Registered Agent

ABEL, ERIC D., ESQ.
2450 NORTH CITRUS HILLS BLVD.
HERNANDO FL 34442

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number, if Applicable)

83.

84. City

85. Zip Code

FL 85

11. I, the undersigned, being a duly qualified officer or director of the above-named corporation, do hereby certify that the foregoing is a true and correct copy of the information required by the Florida Statutes, and that the same has been authorized by the resolution of the board of directors, and that I am a duly qualified officer or director of the corporation.

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS																																																				
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14. I do hereby certify that the information supplied with this filing is accurate, complete and correct, and that I am a duly qualified officer or director of the corporation, and that the same has been authorized by the resolution of the board of directors, and that I am a duly qualified officer or director of the corporation.

SIGNATURE: *Stephen A. Tamposi*
STEPHEN A. TAMPOSI
SIGNATURE AND APPLIED BY PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-95 904-746-6101