

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 28, 2003 8:00 am
Secretary of State

07-28-2003 90137 009 ****70.00

DOCUMENT # **NO1000003575**

1. Entity Name

Pine Hollow Owners Association, Inc.



DO NOT WRITE IN THIS SPACE

90147392

2. Principal Place of Business

460 Pine Hollow Lane

Suite, Apt. #, etc.

West Palm Beach, FL.

3. Mailing Address

6621 Forest Hill Blvd.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

33413

City & State

West Palm Beach, FL.

4. FEI Number

20-0040971

Applied For

Not Applicable

Zip

Country

U.S.A.

Zip

33413

Country

U.S.A.

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Kathleen Budowski**

Street Address (P.O. Box Number is Not Acceptable)

580 Pine Hollow Lane

City

West Palm Beach,

FL

Zip Code

33413

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	Budowski, Walter
STREET ADDRESS	580 Pine Hollow Lane
CITY-ST-ZIP	West Palm Beach, FL - 33413
TITLE	S/T
NAME	Natalie Grace Pena
STREET ADDRESS	6621 Forest Hill Boulevard
CITY-ST-ZIP	West Palm Beach, FL - 33413
TITLE	D
NAME	Ramgor, Paul
STREET ADDRESS	520 Pine Hollow Lane
CITY-ST-ZIP	West Palm Beach, FL - 33413
TITLE	D
NAME	Foreman, Vaughn
STREET ADDRESS	7351 Oakmont Drive
CITY-ST-ZIP	Lake Worth, FL - 33467
TITLE	D
NAME	Pena, Mario
STREET ADDRESS	6621 Forest Hill Boulevard
CITY-ST-ZIP	West Palm Beach, FL - 33413
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Natalie Grace Pena / Natalie Grace Pena - Secretary 7/26/03 (561) 968-6243**

CR2E037B (12/02)