

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90008 032 ****61.25

DOCUMENT # N01095

1. Entity Name

PINE RIDGE AT LAKE TARPON VILLAGE II CONDOMINIUM

Principal Place of Business

Mailing Address

3165 LAKE PINE WAY
TARPON SPRINGS FL 34689

3165 LAKE PINE WAY
TARPON SPRINGS FL 34689-6507

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2364225

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

TANNER, JANIS C
3165 LAKE PINE WAY
TARPON SPRINGS FL 34689

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	<input type="checkbox"/> Delete
NAME	GONZALEZ, GLORIA	
STREET ADDRESS	1300 LAKE PINE WAY UNITE	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MCGOVERN, TIMOTHY	
STREET ADDRESS	1366 PINE GLEN LN #F	
CITY-ST-ZIP	TARPON SPRINGS FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	ROSE, VINCENT A.	
STREET ADDRESS	3153 LAKE PINE WAY B-2	
CITY-ST-ZIP	TARPON SPRINGS FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	PEROTTI, FRANK	
STREET ADDRESS	3166 LAKE PIN WAY 5	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ANDRIOLA, ANTHONY	
STREET ADDRESS	3153 LAKE PINE WAY E1	
CITY-ST-ZIP	TARPON SPRINGS FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	SHEA, JAMES	
STREET ADDRESS	1377 SHAOU PINE WAY/UNIT C	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	

TITLE	V.P.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GLORIA GONZALEZ	
STREET ADDRESS	3100 LAKE PINE #E	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE	SEC.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCGOVERN TIMOTHY	
STREET ADDRESS	1366 PINE GLEN LN #F	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARD PARANO	
STREET ADDRESS	1375 PINE GLEN LN. #E	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VINCENT CORSANO	
STREET ADDRESS	3101 LAKE PINE WAY G1	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan 6, 2000 727 938-9582