## **2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

## DOCUMENT # N07298

1. Entity Name

PINE RIDGE AT LAKE TARPON VILLAGE III



**FILED** May 03, 2005 8:00 am Secretary of State

05-03-2005 90096 013 \*\*\*\*61.25

CONDOMINIUM ASSOCIATION, INC.							35					
Principal Place of Business A			Mailir	Mailing Address								
2189 CLEVELAND STREET SUITE 225 CLEARWATER FL 33765 US			2189 CLEVELAND STREET SUITE 225 CLEARWATER FL 33765 US				† 1 <b>00</b> 76701	DIN 2011 (DDSS 11010 (DDS)	TIN BIEN BIEN <b>a</b>	INII NINI NINI		
2. Principal Place of Business 3.				B. Mailing Address								
Suite, Apt. #, etc.			Su	Suite, Apt. #, etc.				1st MOORE CR2E037 (10/04)				
City & State			Ci	City & State				4. FEI Number	59-2534830	1		plied For t Applicable
Zip	Country		Zi	Zip Cou		intry		5. Certificate of	Status Desired		\$8.75 Add Fee Require	
Name and Address of Current Registered Agent								7. Name and A	ddress of New Ro	gistered /	Agent	
						Name						
LEIGHTON, LENNARD 2189 CLEVELAND STREET SUITE 225						Street Address (P.O. Box Number is Not Acceptable)						
CLE		City				FL	Zip Cod	9				
8 The above	named entit	y submits this statement for	the purr	onse of changing its	registere	ed office or	register	ed agent or both	in the State of Flo		emiliar with	and accent
	tions of regist		uic paik	7000 or orialigning to	109101011	od Onico O	i o gioto.	od agoni, or boun,	0,2.0 01110	i i da i i a i i i i		and dooopt
CIOLUTURE												
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  Due By May 1, 2005				9. Election Campaign Financing Trust Fund Contribution.			<b>\$5.00</b> May Be Added to Fees			Payable		
10. OFFICERS AND DIRECTOR					11.		-	ADDITIONS/CHAN	<u> </u> IGES TO OFFICEF	RS AND DIF	RECTORS IN	10
TITLE	D			☐ Delete	TITLE						☐ Change	Addition
NAME	ALTE OLIA BOER OLI ID BRUE BOOK			NAI							_ •	
SIREET ADDRESS 3177 CHARGER CLUB DRIVE, B300			6	4.772								
CITY-ST-ZIP				CITY								
THILE	PD DELUCA, JOSEPH			☐ Delete TITLE NAM							☐ Change	☐ Addition
NAME STREET ADDRESS	***** OLIVETTE OLIVE ORDE			NAM								
CITY-ST-ZIP	T + 55 51 + 55 51 10 10 51 10 10 51			CITY								
TITLE	SD			☐ Delete	:		-			Change	Addition	
NAME	CAPONE,	RONALD			NAM	Ε					-	
STREET ADDRESS	I					ET ADDRESS						
CITY-\$1.ZIP		PRINGS FL 34689		622	-	-ST-ZIP				<del></del>	_	
TITLE	DICARLO,	JOHN		Delete	NAM						Change	Addition
NAME STREET ADDRESS	STREET ADDRESS 8161 CHARTER CLUB DRIVE A303				ET ADDRESS							
CITY-ST-ZIP	TARPON S	PRINGS FL			•	-ST-ZIP						ì
TITLE	D			Defete	TITLE						☐ Change	Addition
NAME WILBER, HUBERT				•	NAM	E						
STREET ADDRESS 13135 CHARTER CLUB DR., E301				4		E1 ADDRESS						
CITY-ST-ZIP	(D	1111703 I E 34003			CITY	-ST-ZIP	Dπ			_	.,	
FIFLE	HOOD, JE	ANETTE		☐ Delete	TITLE		DT HOO	10 10 AND			Change Change	Addition
STREET ADDRESS 3151 CHARTER CLUB DR., A302			NAME STREE			E E i addres:	3151	D, JEANETT				
CITY-ST-ZIP TARPON SPRINGS FL 34689							TARF	ON SPRING OUTSTER (OC	CLUB DR. #A	N-302		
CITY-ST-ZIP TARPON SPRINGS FL 34689  CITY-ST-ZIP TARPON SPRINGS, FL 34689  12 Ubereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(30). Floridal statements of the information stated in Section 119 07(30). Floridal statements of the information stated in Section 119 07(30). Floridal statements of the information stated in Section 119 07(30). Floridal statements of the information statements of the information statements of the information statements.												

indicated on this report or supplied with use stilling does not quality for the exemption stated in Section 119.07(3)(i). Florida statutes: 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.

ME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #