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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N23283

1. Corporation Name

PINE RIDGE AT DELRAY BEACH HOMEOWNERS ASSOCIATIO  
N, INC.

Principal Place of Business

13751 ONEIDA DRIVE  
DELRAY BEACH FL 33446

Mailing Address

13751 ONEIDA DRIVE  
DELRAY BEACH FL 33446



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

11/02/1987

4. FEI Number

65-0015645

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

EDWIN GOLDWASSER  
7616 MANSFIELD HOLLOW  
DELRAY BEACH FL 33446

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	V	DELETED
NAME	WILLANSKY, DAVE	
STREET ADDRESS	7769 MANSFIELD HOLLOW	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	VP	DELETED
NAME	HAROLD ELLMAN	
STREET ADDRESS	13901 ONEIDA DR	
CITY-ST-ZIP	DELRAY BEACH FL 33446	
TITLE	D	DELETED
NAME	BERT MEHL	
STREET ADDRESS	7632 MANSFIELD HOLLOW	
CITY-ST-ZIP	DELRAY BEACH FL 33446	
TITLE	S	DELETED
NAME	DOROTHY BRANNIGAN	
STREET ADDRESS	7756 MANSFIELD HOLLOW	
CITY-ST-ZIP	DELRAY FL 33446	
TITLE	D	DELETED
NAME	MANN, EDWARD	
STREET ADDRESS	7832 LAKE CHAMPLAIN CT	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	D	DELETED
NAME	KURT SIMILES	
STREET ADDRESS	7613 MANSFIELD HOLLOW	
CITY-ST-ZIP	DELRAY BEACH FL 33446	

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

GLORIA LAUFEL  
7949 MANSFIELD HOLLOW RD  
DELRAY BEACH, FL 33446

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/1/98)