

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90049 033 ****61.25

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DOCUMENT # N23283

1. Entity Name

PINE RIDGE AT DELRAY BEACH HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

13751 ONEIDA DRIVE
DELRAY BEACH FL 33446

13751 ONEIDA DRIVE
DELRAY BEACH FL 33446

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0015645

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~EDWIN GOLDWASSER~~
~~7616 MANSFIELD HOLLOW~~
~~DELRAY BEACH FL 33446~~

Steve Corwin
7820 Mansfield Hollow
Delray Beach FL 33446

Name Steve Corwin

Street Address (P.O. Box Number is Not Acceptable) 7820 Mansfield Hollow

City Delray Beach FL Zip Code 33446

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 D
NAME WILLANSKY, DAVE
STREET ADDRESS 7769 MANSFIELD HOLLOW
CITY-ST-ZIP DELRAY BEACH FL
☐ Delete no change

TITLE P
NAME Steve Corwin
STREET ADDRESS 7820 MANSFIELD HOLLOW
CITY-ST-ZIP Delray Beach, FL 33446
☒ Change ☐ Addition

TITLE P
NAME GOLDWASSER, EDWIN
STREET ADDRESS 7616 MANSFIELD HOLLOW
CITY-ST-ZIP DELRAY BEACH FL 33446
☒ Delete

TITLE VP
NAME Arthur Siegel
STREET ADDRESS 7600 MANSFIELD HOLLOW
CITY-ST-ZIP Delray Beach, FL 33446
☒ Change ☐ Addition

TITLE D
NAME LAMPEL, GLORIA
STREET ADDRESS 7949 MANSFIELD HOLLOW ROAD
CITY-ST-ZIP DELRAY BEACH FL 33446
☒ Delete

TITLE T
NAME Kenneth Golberg
STREET ADDRESS 7677 MANSFIELD HOLLOW
CITY-ST-ZIP Delray Beach, FL 33446
☒ Change ☐ Addition

TITLE VP
NAME DOROTHY BRANNIGAN
STREET ADDRESS 7756 MANSFIELD HOLLOW
CITY-ST-ZIP DELRAY FL 33446
☒ Delete

TITLE S
NAME MARY LORENZ
STREET ADDRESS 13891 ONEIDA DR
CITY-ST-ZIP Delray Beach FL 33446
☒ Change ☐ Addition

TITLE D
NAME KURT SIMILES
STREET ADDRESS 7613 MANSFIELD HOLLOW
CITY-ST-ZIP DELRAY BEACH FL 33446
☒ Delete

TITLE D
NAME AL Levine
STREET ADDRESS 7620 MANSFIELD HOLLOW
CITY-ST-ZIP Delray Beach FL 33446
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE D
NAME Bill Hecker
STREET ADDRESS 7945 MANSFIELD HOLLOW
CITY-ST-ZIP Delray Beach FL 33446
☐ Change ☒ Addition

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: Mary Lorenz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/02 561-6378858
Date Daytime Phone #

CR2002 9/01