

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2004 8:00 am
Secretary of State

02-09-2004 90048 037 ****61.25

DOCUMENT # N23283			
1. Entity Name PINE RIDGE AT DELRAY BEACH HOMEOWNERS ASSOCIATION, 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		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E037 (11/03)

4. FEI Number 65-0015645		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SIEGEL, ARTHUR 7600 MANSFIELD HOLLOW RD DELRAY BEACH FL 33446		7. Name and Address of New Registered Agent Name: <u>GLORIA - LAMPEL</u> Street Address (P.O. Box Number is Not Acceptable): <u>7949 MANSFIELD HOLLOW ROAD</u> City: <u>DELRAY BEACH</u> FL Zip Code: <u>33446</u>	
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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: Gloria Lampel DATE: 2/2/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 Due By May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: PD NAME: SIEGEL, ARTHUR STREET ADDRESS: 76 MANSFIELD HOLLOW RD CITY-ST-ZIP: DELRAY BEACH FL 33446 ☒ Delete		TITLE: PRESIDENT NAME: GLORIA LAMPEL STREET ADDRESS: 7949 MANSFIELD HOLLOW ROAD CITY-ST-ZIP: DELRAY BEACH FLORIDA 33446 ☒ Change ☐ Addition	
TITLE: VP NAME: JANSON, ROBERT STREET ADDRESS: 7628 MANSFIELD HOLLOW RD CITY-ST-ZIP: DELRAY BEACH FL 33446 ☒ Delete		TITLE: VICE PRESIDENT NAME: DOROTHY BRANNIGAN STREET ADDRESS: 7756 MANSFIELD HOLLOW ROAD CITY-ST-ZIP: DELRAY BEACH, FLORIDA 33446 ☒ Change ☐ Addition	
TITLE: TD NAME: GOLBERG, KENNETH STREET ADDRESS: 7677 MANSFIELD HOLLOW CITY-ST-ZIP: DELRAY BEACH FL 33446 ☐ Delete		TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: ☐ Change ☐ Addition	
TITLE: SD NAME: LORENZ, MARY STREET ADDRESS: 13891 ONEIDA DRIVE CITY-ST-ZIP: DELRAY BEACH FL 33446 ☐ Delete		TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: ☐ Change ☐ Addition	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: ☐ Delete		TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: ☐ Change ☐ Addition	
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: ☐ Delete		TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: ☐ 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: KENNETH GOLBERG 1/28/04 638-5266

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #