


FILE NOW: FILING FEE IS \$61.25

FILED
Feb 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham , Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N28172** (7)
1. Corporation Name
PINEAPPLE LANE PROPERTY OWNERS' ASSOCIATION, INC



Principal Place of Business C/O WALTER JAVORSKY 4 PINEAPPLE LANE SEWALLS POINT FL 34996-3340 US		Mailing Address C/O WALTER JAVORSKY 4 PINEAPPLE LANE SEWALLS POINT FL 34996-3340 US	
2. Principal Place of Business 21 C/O ROLF DRUCKER Suite, Apt. #, etc. 22 1 Pineapple Lane City & State 23 Sewall's Point, FL Zip 24 34996	2a. Mailing Address 26 C/O ROLF DRUCKER Suite, Apt. #, etc. 27 1 Pineapple Lane City & State 28 Sewall's Point, FL Zip 29 34996	Country 25 Martin	Country 30 Martin

3. Date Incorporated or Qualified 09/01/1988	4. FEI Number 65-0278445	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent JAVORSKY, WALTER 4 PINEAPPLE LANE SEWALLS PT FL 34996		10. Name and Address of New Registered Agent 81 Name DRUCKER, ROLF 82 Street Address (P.O. Box Number is Not Acceptable) 1 Pineapple Lane 83 84 City Sewall's Point FL 85 Zip Code 34996	
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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 *Rolf Drucker* **ROLF DRUCKER** 1/18/98 DATE

Signature, type, and print name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DT	<input checked="" type="checkbox"/> DELETE	1.1 TITLE T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME JAVORSKY, LYDIA		1.2 NAME ROLF DRUCKER	
STREET ADDRESS 4 PINEAPPLE LANE		1.3 STREET ADDRESS 1 Pineapple Lane	
CITY-ST-ZIP SEWALLS PT FL		1.4 CITY-ST-ZIP Sewall's Point FL 34996	
TITLE V	<input type="checkbox"/> DELETE	2.1 TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PERIMAN, MARK		2.2 NAME	
STREET ADDRESS 9 PINEAPPLE LN		2.3 STREET ADDRESS	
CITY-ST-ZIP SEWALLS PT FL 34996		2.4 CITY-ST-ZIP	
TITLE S	<input checked="" type="checkbox"/> DELETE	3.1 TITLE V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME JAVORSKY, LYDIA		3.2 NAME DRUCKER, OLGA	
STREET ADDRESS 4 PINEAPPLE LN		3.3 STREET ADDRESS 1 Pineapple Lane	
CITY-ST-ZIP SEWALLS PT FL 34996		3.4 CITY-ST-ZIP Sewall's Point, FL 34996	
TITLE D	<input type="checkbox"/> DELETE	4.1 TITLE S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME GREENE, RICHARD		4.2 NAME DRUCKER, OLGA	
STREET ADDRESS 2571 PRICE CRT		4.3 STREET ADDRESS 1 Pineapple Lane	
CITY-ST-ZIP PT ST LUCIE FL 34984		4.4 CITY-ST-ZIP Sewall's Point, FL 34996	
TITLE P	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME JAVORSKY, WALTER		5.2 NAME	
STREET ADDRESS 4 PINEAPPLE LN		5.3 STREET ADDRESS	
CITY-ST-ZIP SEWALLS PT FL 34996		5.4 CITY-ST-ZIP	
TITLE T	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME JAVORSKY, LYDIA		6.2 NAME	
STREET ADDRESS 4 PINEAPPLE LANE		6.3 STREET ADDRESS	
CITY-ST-ZIP SEWALLS PT. FL		6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Rolf Drucker* **ROLF DRUCKER** 1/18/98

CR2037 (10/97)

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