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FILED

Feb 07 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000069935 (1)

1. Corporation Name

THE PINES OF MANDARIN, INC.

Principal Place of Business

311 PARK PLACE BLVD., SUITE 225
CLEARWATER FL 34619

Mailing Address

311 PARK PLACE BLVD., SUITE 225
CLEARWATER FL 34619-3923

3. Date Incorporated or Qualified

09/12/1995

3a. Date of Last Report

04/15/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

30

4. FEI Number

59-3334308

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

PIAZZA, JOHN J
311 PARK PLACE BLVD., SUITE 225
CLEARWATER FL 34619

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 607.0502 and 607.1508, 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 607.0505, 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 D ☐ DELETE
NAME PIAZZA, JOHN J
STREET ADDRESS 311 PARK PLACE BLVD., SUITE 225
CITY-ST-ZIP CLEARWATER FL 34619TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP2.1 TITLE Senior Vice President ☐ Change ☒ Addition
2.2 NAME Lentini, Vincent J.
2.3 STREET ADDRESS 311 Park Place Blvd., Ste. 225
2.4 CITY-ST-ZIP Clearwater, FL 346193.1 TITLE Vice President ☐ Change ☒ Addition
3.2 NAME Piazza, Rosemary E.
3.3 STREET ADDRESS 311 Park Place Blvd., Ste. 225
3.4 CITY-ST-ZIP Clearwater, FL 346194.1 TITLE Secretary ☐ Change ☒ Addition
4.2 NAME Lombardi, Rita A.
4.3 STREET ADDRESS 311 Park Place Blvd., Ste 225
4.4 CITY-ST-ZIP Clearwater, FL 346195.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Rita A Lombardi*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 2/3/97 Daytime Phone # (813) 726-3210

CR2E034 (9/96)