FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 12, 1999 8:00 am Secretary of State

04-12-1999 90034 011 ***150.00

DOCUMENT # P97000061851

1. Corporation Name

PINE RIDGE TRAILER PARK RENTALS, INC.

Principal Place of Business
4271 SW 12TH ST
PLANTATION FL 33317

21

2. Principal Place of Business

Mailing Address

4271 SW 12TH ST PLANTATION FL 33317

2a. Mailing Address

26



Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

07/17/1997 4. FEI Number

59-2316760

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—	.#; etc.	27 Suit	e, Apt.#, etc			5. Certificate of Status Desired					\$8.75_Additional Fee Required			
City & Sta	nte .					5. Election C	ampaign Fir	ancino		\$5.00	May Be	1		
23							d Contributio		<u> </u>	` Added to				
Zip	Country	Zip Country						. This corpo	ration owes	the curren	t year Int		<u></u>	
24	25	30	Personal Property Tax.						X Yes	□ No	1			
	9. Name and Address of Current	Registered	d Agent				10). Name an	d Address o	f New Reg	gistered	Agent		-
					81	Name)							
	AN, FRANK E JR					Street Add	Address (P.O. Box Number is Not Acceptable)							
	1 SW 12TH ST		82 Street Addre					(i .o. o	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,]
PLA	INTATION FL 33317	•	83											
				84 City								85 Zip C	ode	┨
					04	City					FL	.		
-11,_Pursuan	t to the provisions of Sections 607.0502	and 607.15	508, Florida Statut	tes, the a	bove-	named corp	oorati	on submits t	his statemer	t for the pu	irpose of	changing its	registered]
office or	t.to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligations.	f Florida. So ods of Sec	uch change was a tion 607.0505. Flo	authorizeo orida Stat	d by ti utes.	ne corporati	on s	board of dire	ciors, i nere	ву ассерс	ine appon	IIIIIICIII AS IEE)istered	
		7							,	Apal	フノ	<i>499</i>		
SIGNATURE	orginature, typed or printed name of registered agent	and title if applic	cable. (NOTE	Registered	Agent	signature require	ed wher] 6
12.	OFFICERS AND	DIRECTO	RS	13.				ADDITION	S/CHANGES	TO OFFI	CERS AN	ID DIRECTO		5
TITLE	D		□ DÉLETE	1.1 TITL		$ \rho $	7	D				☐ Change	Addition	3
NAME	DEAN, FRANK E JR			1.2 N	AME									3
STREET ADDRESS	s 5500 NE 26TH AVE	Ë 1.3 \$			REET	ADORESS								ز
CITY-ST-ZIP	FT LAUDERDALE FL 33308			1.4 CI	TY-\$T-								—	1 3
TITLE	D		☐ DELETE	2.1 TITL		VI	0 5	5 D				☐ Change	Addition	Ι,
NAME	DEAN, MARILYN C			2.2 N	AME									
STREET ADDRESS					REET	ADDRESS			<u> </u>			·		
CITY-ST-ZIP	FT LAUDERDALE FL 33308			2.40	ΠY-ST	ZIP								1
TITLE			☐ DELETE	3.1 TI	TLE							Change	☐ Addition	
NAME				3.2 N	AME									
STREET ADDRESS	s			3.3 S	REET!	ADDRESS								
CITY-ST-ZIP				3.4. C	ITY-ST	-ZIP								-
TITLE			☐ DELETE	4.1 TI	TLE	ļ						☐ Change	Addition	
NAME				4. 2 N	AME	1								1
STREET ADORES	s			4.3 S	TREET	ADDRESS								1
CITY-ST-ZIP				4.4 C	TY-ST	- ZIP								-
TITLE		☐ DELETE 5.1										☐ Change	☐ Addition	
NAME				5.2 N										
STREET ADDRES	s			5.3 S	REET	ADDRESS								
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TITLE			☐ DELETE	6.1 T	TLE							Change	Addition	
NAME				6.2 N	AME									
STREET ADDRES	s			6.3 S	TREET	ADDRESS								
CEN ET ZID				6.4 C	ITY-ST	-ZIP								1

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 607, 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