

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

FILED

Mar 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S10234** (0)

1. Corporation Name
PINE RIDGE GOLF MANAGEMENT, INC.

Principal Place of Business
**1620 LANDS END ROAD
MANALAPAN FL 35778**

Mailing Address
**1620 LANDS END ROAD
MANALAPAN FL 33462-4762**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/01/1990		3a. Date of Last Report 01/23/1996	
21 5600 Elkcam Blvd.		26 ONE Virginia Ave.		4. FEI Number 59-3055903		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22		27 220		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
City & State Beverly Hills, FL		City & State INDpls. IN		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Zip 33462		Country USA		29 46204		30 USA	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
SCHWARTZ, JOSEPH 1620 LANDS END RD. MANALAPAN FL 33462				81 Name Sheldon Friedman			
				82 Street Address (P.O. Box Number is Not Acceptable) 22467 Arcadia Ct.			
				83			
				84 City Boca Raton FL 85 Zip Code 33433			

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 *Sheldon Friedman* DATE **3-23-97**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	OK	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FRIEDMAN, SHELDON			1.2 NAME	OK		
STREET ADDRESS	1004 W. 77TH ST.N RD.			1.3 STREET ADDRESS	22467 Arcadia Ct.		
CITY-ST-ZIP	INDIANAPOLIS IN			1.4 CITY-ST-ZIP	Boca Raton FL 33433		
TITLE	VD	<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHWARTZ, JOSEPH			2.2 NAME			
STREET ADDRESS	1620 LANDS END RD.			2.3 STREET ADDRESS			
CITY-ST-ZIP	MANALAPAN FL			2.4 CITY-ST-ZIP			
TITLE	SD	<input type="checkbox"/> DELETE		3.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	EPPELRY, HARRISON			3.2 NAME			
STREET ADDRESS	1125 BROOKSIDE			3.3 STREET ADDRESS	ONE Virginia Ave #220		
CITY-ST-ZIP	INDIANAPOLIS IN			3.4 CITY-ST-ZIP	INDPL IN #46204		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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: *Harrison Epperly* DATE **3/27/97**

CR2E034 (9/96)