

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
---	---	---

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

95 FEB -1 PM 12:17

DOCUMENT # 748729 (1)

1. Corporation Name
PINE RIDGE IV CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 3591 PINE NEEDLE LAKE WORTH FL 33463	Mailing Address 3591 PINE NEEDLE LAKE WORTH FL 33463
--	--

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/30/1979	3a. Date of Last Report 01/31/1994
4. FEI Number 59-2001903	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. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**SCATURRO, GEORGE
 3560 PINE NEEDLE DRIVE
 LAKE WORTH FL 33463**

10. Name and Address of New Registered Agent

81 Name HARRY BONNET
82 Street Address (P.O. Box Number is Not Acceptable) 5960 PINE CONE CT.
83
84 City LAKE WORTH
85 Zip Code FL 33463

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: *Harry Bonnet* **HARRY BONNET - PRESIDENT** **JAN 26, 1995**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS	
TITLE P	SCATURRO, GEORGE 3560 PINE NEEDLE DR LAKE WORTH FL
TITLE D	MANNIX, DAN 5960 PINE CONE CT LAKE WORTH, FL 3
TITLE S	GAUGHRAN, GRACE 3530 LAZY PINE WAY LAKE WORTH, FL 00000
TITLE T	MEYER, DOROTHY 3561 LONG PINE CT. LAKE WORTH, FL 3
TITLE D	BONNET, HARRY 5960 PINE CONE CT. LAKE WORTH FL
TITLE D	PEPE, FRANK 3560 PINE TREE CT. LAKE WORTH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE <input type="checkbox"/>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE <input type="checkbox"/>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 70.07(3)(a), 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: *Harry Bonnet* **HARRY BONNET - PRESIDENT** **JAN 26, 1995** (407)967-7727
Signature and typed or printed name of signing officer or director Date Telephone #