

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751389

Entity Name: PINE RIDGE SOUTH I CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**100 LAKE PINE CIRCLE
GREEN ACRES, FL 33463-5158**Current Mailing Address:**100 LAKE PINE CIRCLE
GREEN ACRES, FL 33463-5158**FEI Number:** 59-2029767**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PROPERTY MANAGEMENT RESOURCES
4000 S.57TH AVENUE
#101
LAKE WORTH, FL 33463 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name LITOWSKY, BETTY ANNE
Address 111 A-1 LAKE PINE CIRCLE
City-State-Zip: GREENACRES FL 33463

Title PRESIDENT
Name GIANNESCHI, JOSEPH JR
Address 106 LAKE PINE CIRCLE B1
City-State-Zip: GREENACRES FL 33463

Title DIRECTOR
Name DINOTO, JOE
Address 106 PINE RIDGE CIR UNIT C2
City-State-Zip: GREENACRES FL 33463

Title SECRETARY
Name O'CONNOR, HARI
Address 115 LAKE PINE CIR C2
City-State-Zip: GREENACRES FL 33463

Title DIRECTOR
Name AMES, HORACE
Address 115 LAKE PINE CIRCLE
City-State-Zip: GREENACRES FL 33463

Title DIRECTOR
Name SANTACRUZ, MARIA
Address 121 PINE RIDGE CIR UNIT D2
City-State-Zip: GREENACRES FL 33463

Title DIRECTOR
Name PAPA, JOSEPH
Address 120 LAKE PINE CIR C2
City-State-Zip: GREENACRES FL 33463

Title TREASURER
Name BUCZYNSKI, BOB
Address 104 PINE RIDGE CIR C2
City-State-Zip: GREENACRES FL 33463

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH PAPA

DIRECTOR

02/27/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	VP
Name	GIORDANO, KATHLEEN
Address	141 PINE RIDGE CIRCLE D2
City-State-Zip:	GREENACRES FL 33463