2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753010

Entity Name: THE GARDENS AT PINE ISLAND RIDGE, INC.

Current Principal Place of Business:

9360 SW 23RD ST DAVIE. FL 33324-6817

Current Mailing Address:

9360 SW 23RD ST

DAVIE. FL 33324-6817 US

FEI Number: 59-2058717 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HODES, STUART 3562 SHAWNEE LN MELBOURNE, FL 32901-8180 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

FILED Apr 17, 2024

Secretary of State

2005553367CC

Officer/Director Detail :

Title Title DIRECTOR FRANKS, EMILY Name Name BOSSO, MARK

Address 2140 SW 94TH TER Address 2251 SW 92ND TER

APT 2202

APT 1703

APT 203

City-State-Zip: DAVIE FL 33324-6805 City-State-Zip: DAVIE FL 33324-6851

Title **PRESIDENT** Title **DIRECTOR** Name WILSON, MICHAEL Name SMALL, MARIA

2160 SW 93RD WAY 2201 SW 92ND TER Address Address

APT 1001

DAVIE FL 33324-6815 City-State-Zip: DAVIE FL 33324-6841 City-State-Zip:

Title TREASURER Title **DIRECTOR** Name PATTERSON, JOHN Name LOWE, KIM

Address 9320 SW 23RD ST Address 2200 SW 92ND TER

APT 4101 APT 2801

City-State-Zip: DAVIE FL 33324-6821 City-State-Zip: DAVIE FL 33324-6840

Title **DIRECTOR** Title **DIRECTOR** MENDEZ, CHARLES SELDNER, JUDY Name Name

Address 2120 SW 92ND TER Address 9350 SW 23RD ST

> APT 2903 APT 4401

DAVIE FL 33324-6837 City-State-Zip: DAVIE FL 33324-6827 City-State-Zip:

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.

04/17/2024 SIGNATURE: MICHAEL WILSON **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date