## **2003 NOT-FOR-PROFIT CORPORATION**

## **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N0100003622

Apr 25, 2003 8:00 am Secretary of State 04-25-2003 90313 027 \*\*\*\*61.25

**FILED** 

ARNOLD	RIDGE HOMEOWNERS ASSO	OCIATION, INC.						
Principal Place of Business 2120 CORPORATE SQUARE BOULEVARD SUITE 3 JACKSONVILLE FL 32216		Mailing Address 2120 CORPORATE SQUARE BOULEVARD SUITE 3 JACKSONVILLE FL 32216		) 	DE 11018 DOME DOME DOME	<b>Borns</b> Hill <b>e O</b> lkio is	i 810 1161 1881	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59	-3744777	———	oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of Sta	tus Desired	\$8.75 Add	
	6. Name and Address of Current	Registered Agent			7. Name and Addre	ess of New Registere	d Agent	
1			Name					
	K, JOHN A		Street	Address (F	P.O. Box Number is No	ot Acceptable)		
	PRPORATE SQUARE BOULEVARD							
SUITE 3	NVILLE FL 32216							
JACKSU	INVILLE PL 32216		City			F	Zip Cod	le _
the obligat	e named entity submits this statement for tions of registered agent	or the purpose of changing its	registered office	or registere	ed agent, or both, in the	ne State of Florida. I an	n familiar with,	and accept
SIGNATURE	Signature, typed of ponter name of registered agent	and title if applicable. (NOTE	: Registered Agent sign	ature required	when reinstating)	DATE		<del></del> }
	<del>//</del>				<del></del>			
, <u>s</u> ,s	FILE NOW: FEE IS \$61.25	9. Election Can Trust Fund C	npaign Financing Contribution.		\$5.00 May Be Added to Fees	Make Che Florida Depa	ck Payable artment of S	
ا پ 10.	OFFICERS AND DI	Trust Fund C	Contribution.		Added to Fees		DIRECTORS IN	State
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ا پ 10.	OFFICERS AND DI	Trust Fund C	Contribution.	·	Added to Fees	Florida Depa	DIRECTORS IN	State
10. TITLE NAME STREET ADDRESS	OFFICERS AND DIE PD SEMANIK, JOHN A 2120 CORPORATE SQUARE BOI JACKSONVILLE FL 32216 VD	Trust Fund C	11. TITLE NAME STREET ADDRESS		Added to Fees	Florida Depa	DIRECTORS IN Change	State  1 10  Addition
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	PD SEMANIK, JOHN A 2120 CORPORATE SQUARE BOY JACKSONVILLE FL 32216 VD SEMANIK, ARNOLD J	Trust Fund C	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Added to Fees	Florida Depa	DIRECTORS IN Change	State  1 10  Addition
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

VATURE REQUIRED