

**2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 05, 2012  
Secretary of State**

DOCUMENT# N01000007614

**Entity Name:** EAST RIDGE PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2106 EAST RIDGE CIR EAST  
BOYNTON BEACH, FL 33435

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 291  
BOYNTON BEACH, FL 33425

**New Mailing Address:**

**FEI Number:** 04-3642876      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

COLE, ANGELA  
2106 SE RIDGE CIRCLE EAST  
BOYNTON BEACH, FL 33435      US

**Name and Address of New Registered Agent:**

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: ANGELA COLE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** SD  
**Name:** NUNEZ, MARIA  
**Address:** 524 E RIDGE CIR  
**City-St-Zip:** BOYNTON BEACH, FL 33435

**Title:** P  
**Name:** COLE, ANGELA  
**Address:** 2106 E RIDGE CIR  
**City-St-Zip:** BOYNTON BEACH, FL 33435

**Title:** VD  
**Name:** SMITH, RODERICK  
**Address:** 2102 E. RIDGE RD.  
**City-St-Zip:** BOYNTON BEACH, FL 33435

**Title:** TD  
**Name:** ROLAND, SAMANTHA  
**Address:** 2122 EAST RIDGE CIRCLE EAST  
**City-St-Zip:** BOYNTON BEACH, FL 33435

**Title:** VD  
**Name:** KELLEHER, JERRY  
**Address:** 2114 EAST RIDGE CIR  
**City-St-Zip:** BOYNTON BEACH, FL 33435

**Title:** M  
**Name:** CHARLES, EMANUEL  
**Address:** 585 EST RIDGE CIRCLE NORTH  
**City-St-Zip:** BOYNTON BEACH, FL 33435

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: ANGELA COLE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

PR

10/05/2012

\_\_\_\_\_  
Date