

FILE NOW: FILING FEE IS \$61.25

FILED
May 09 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N22075** (8)
1. Corporation Name
LAKE RIDGE CLUB HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
2180 WEST SR 434, SUITE 5000
LONGWOOD FL 32779-5044
US

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

3. Date Incorporated or Qualified **08/17/1987** 3a. Date of Last Report **05/01/1996**

4. FEI Number **59-2871300** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HART, JAMES W JR
2180 WEST SR 434, SUITE 5000
LONGWOOD FL 32779-5044

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-nating) DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE
NAME **WAJNBERG, DAVE**
STREET ADDRESS **12425 LAKE RIDGE CIRCLE**
CITY-ST-ZIP **CLERMONT FL**

TITLE **VD** ☒ DELETE
NAME **SCHEK, DENNIS**
STREET ADDRESS **12600 LAKE RIDGE CIRCLE**
CITY-ST-ZIP **CLERMONT FL**

TITLE **SD** ☒ DELETE
NAME **MATLOCK, SUSAN**
STREET ADDRESS **12726 LAKE RIDGE CIRCLE**
CITY-ST-ZIP **CLERMONT FL**

TITLE **TD** ☐ DELETE
NAME **PENDERGRAS, RICHARD**
STREET ADDRESS **12708 LAKE RIDGE CIRCLE**
CITY-ST-ZIP **CLERMONT FL**

TITLE **D** ☒ DELETE
NAME **OWINGS, JERROLD**
STREET ADDRESS **12748 LAKE RIDGE CIRCLE**
CITY-ST-ZIP **CLERMONT FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **PD** ☐ Change ☒ Addition
12 NAME **LINDA ZEH**
1B STREET ADDRESS **11826 OVERLOOK DRIVE**
14 CITY-ST-ZIP **CLERMONT FL 34711**

21 TITLE **VD** ☐ Change ☒ Addition
22 NAME **HENRY THACKER**
2B STREET ADDRESS **12544 LAKE RIDGE CIRCLE**
2 4 CITY-ST-ZIP **CLERMONT FL 34711**

31 TITLE **SD** ☐ Change ☒ Addition
32 NAME **DIANA HUDSON**
3B STREET ADDRESS **12517 LAKE RIDGE CIRCLE**
3 4 CITY-ST-ZIP **CLERMONT FL 34711**

41 TITLE **D** ☐ Change ☒ Addition
4 2 NAME **JAMES RODRIGUEZ**
4B STREET ADDRESS **12532 LAKE RIDGE CIRCLE**
4 4 CITY-ST-ZIP **CLERMONT FL 34711**

51 TITLE ☐ Change ☐ Addition
5 2 NAME
5B STREET ADDRESS
5 4 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
6 2 NAME
6B STREET ADDRESS
6 4 CITY-ST-ZIP

14. I do 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 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.

CR2E037 (9/96)