

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N22075

1. Entity Name

LAKE RIDGE CLUB HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90047 017 ****61.25

Principal Place of Business

Mailing Address

52 E SOUTH STREET
ORLANDO FL 32801
US

52 E. SOUTH STREET
ORLANDO FL 32801-3308
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2871300

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ASHER, DONALD L JR
52 E. SOUTH STREET
ORLANDO FL 32801-3396

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	☒ Delete
NAME	ZEH, UNDA	
STREET ADDRESS	11826 OVERLOOK DRIVE	
CITY-ST-ZIP	CLERMONT FL	
TITLE	PD	☒ Delete
NAME	JANETZKI, REINER	
STREET ADDRESS	11811 RIDGEVIEW	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	SD	☐ Delete
NAME	DECKER, SHIRLEY	
STREET ADDRESS	12623 LAKE RIDGE CIR	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	D	☒ Delete
NAME	PENDERGAST, RICHARD	
STREET ADDRESS	12708 LAKE RIDGE CIRCLE	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE	TD	☐ Delete
NAME	TAYLOR, RON	
STREET ADDRESS	12645 LAKE RIDGE CIR	
CITY-ST-ZIP	CLERMONT FL 34711	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	VD	☐ Change ☒ Addition
NAME	Nailos, Heath	
STREET ADDRESS	12639 Lake Ridge Circle	
CITY-ST-ZIP	CLERMONT, FL 34711	
TITLE	PD	☐ Change ☒ Addition
NAME	Lewis, Patience	
STREET ADDRESS	12530 Lakeview Lane	
CITY-ST-ZIP	CLERMONT, FL 34711	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	Vaughn, Robert	
STREET ADDRESS	12649 Lake Ridge Circle	
CITY-ST-ZIP	CLERMONT, FL 34711	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)