

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 12, 2000 8:00 am**  
**Secretary of State**

01-12-2000 90081 020 \*\*\*\*61.25

**DOCUMENT # N40329**

1. Entity Name  
**LANSING RIDGE HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business <b>P. O. BOX 361172          MELBOURNE FL 32936-1172          US</b>	Mailing Address <b>P O BOX 361172          MELBOURN. FL          MELBOURNE FL 32936-1172          US</b>
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-3065278</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**KISS, EUGENE A.  
 2108 APPALACHIAN DR.  
 SUITE 1000  
 MELBOURNE FL 32935**

7. Name and Address of New Registered Agent  
 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 \_\_\_\_\_ (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	
TITLE <b>D</b>	<input type="checkbox"/> Delete <b>MURATORE, ANN 2560 GROUDTETON BLVD MELBOURNE FL 32935</b>
TITLE <b>VP</b>	<input type="checkbox"/> Delete <b>DONELDRIGE 2321 APPALACHIAN DR MELBOURNE FL 32935</b>
TITLE <b>TR</b>	<input type="checkbox"/> Delete <b>ANTOLICK, EMIL 2141 GROUDTETON BLVD MELBOURNE FL 32935</b>
TITLE <b>S</b>	<input type="checkbox"/> Delete <b>DADE, BOB 2161 APPALALHLON DR MELBOURN FL 32935</b>
TITLE <b>D</b>	<input type="checkbox"/> Delete <b>STEVE CHERISHIAN 2016 ADIRON DOCK CIR MELBOURNE FL 32935</b>
TITLE <b>D</b>	<input checked="" type="checkbox"/> Delete <b>HAMILTON, ART 2059 ALLEGHANEY MELBOURNE FL</b>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE <b>P</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>EUGENE A KISS 2108 APPALACHIAN DR. MELBOURNE, FLORIDA 32935</b>
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>GLORIA BATTLE 2135 ROYAL POINCIANA BLVD MELBOURNE, FLORIDA 32935</b>

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: *Eugene A. Kiss* **EUGENE A. KISS** President 01/04/00 407-254-7311  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2EN37 10/99