SIGNATURE:

2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Feb 21, 2001 8:00 am Secretary of State DOCUMENT # N9500000189 1. Entity Name FOREST RIDGE VILLAGE PROPERTY OWNERS ASSOCIATION 02-21-2001 90065 025 ****61.25 Principal Place of Business Mailing Address 2476 N ESSEX AVE 2476 N ESSEX AVE HERNANDO FL 34442 HERNANDO FL 34442 2. Principal Place of Business 3. Mailing Address SSEW AUC 9404 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City₁& State 4. FEI Number 59-3287582 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) ABEL, ERIC D 2476 N ESSEX AVE HERNANDO FL 34442 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10 ROWAN X Change ☐ Addition Delete TITLE TITLE 2424 N. ESSEX AVE NAME TAMPOSI, STEPHEN A NAME STREET ADDRESS STREET ADDRESS 2476 N. ESSEX AVE HERNANDO FL 34442 CITY-ST-7IP HERNANDO FL 34442 CITY-ST-ZIP 🗷 Delete Change Addition TITI F TD TITLE 2424 N. ESSEX AVE. NAME PASTOR, JOHN E NAME STREET ADDRESS HERNANDO FL 34442 STREET ADDRESS 2476 N. ESSEX AVE CITY-ST-ZIP CITY-ST-ZIP HERNANDO FL 34442 ☐ Addition TITLE SD Delete TITLE BAZEMORE, LISA NAME NAME STREET ADDRESS STREET ADDRESS 2476 N. ESSEX AVE CITY-ST-ZIP CITY-ST-ZIP **HERNANDO FL 34442** Change TITLE TITLE Delete NAME ANTONOFF, STEVE 2424 N. ESSEX AVE NAME STREET ADDRESS STREET ADDRESS 2476 N ESSEX AVE CITY-ST-ZIP CITY-ST-ZIP **HERNANDO FL 34442** Addition TITLE □ Delete TITLE NAME WHITE, ROBERT NAME STREET ADDRESS STREET ADDRESS 2476 N ESSEX AVE CITY-ST-ZIP CITY-ST-ZIP HERNANDO FL 34442 ☐ Addition TITLE Delete TITLE NAME NAME HOLBROOK, CHARLES STREET ADDRESS STREET ADDRESS 2476 N ESSEX AVE CITY-ST-ZIP CITY-ST-ZIP HERNANDO FL 34442 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 peport 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.

NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #