

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -4 PM 11:36

DOCUMENT # 200836 (5)

1. Corporation Name
THE RIDGE, INC.

Principal Place of Business
**THE RIDGE CO-OP APTS
3401 S OCEAN BLVD
HIGHLAND BEACH FL 33487-2584**

Mailing Address
**THE RIDGE CO-OP APTS
3401 S OCEAN BLVD
HIGHLAND BEACH FL 33487-2584**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **04/18/1957** 3a. Date of Last Report **01/19/1994**

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

59-1206804

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24

25

29

30

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

**HARDY, HAROLD
3404 S. OCEAN BLVD. APT 2
HIGHLAND BEACH FL 33487**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **GALLOPO, CHARLES**
STREET ADDRESS **25 ANDORRA ST.**
CITY-ST-ZIP **LAGUNA NIGUEL CA**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **VD**
NAME **FRANK, ELEANOR**
STREET ADDRESS **3401 S OCEAN BLVD**
CITY-ST-ZIP **HIGHLAND BCH, FL 00000**

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **D**
NAME **EYPEL, ARTHUR G**
STREET ADDRESS **3401-S OCEAN BLVD**
CITY-ST-ZIP **HIGHLAND BCH, FL 00000**

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **PD**
NAME **CANTIN, EDMOND**
STREET ADDRESS **90 BERLIOZ MUN ISLAND**
CITY-ST-ZIP **MONTREAL, CANADA 00000**

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D**
NAME **HARDY, HAROLD**
STREET ADDRESS **3401 S. OCEAN BLVD.**
CITY-ST-ZIP **HIGHLAND BCH. FL.**

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **SD**
NAME **ALEXANDER, PAUL F**
STREET ADDRESS **3401-S OCEAN BLVD**
CITY-ST-ZIP **HIGHLAND BCH, FL 00000**

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 837, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report or on an attachment thereto.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ARTHUR G. Eypel - Pres. 3/01/95 407-847-2717