

2006 NOT-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2006 8:00 am
Secretary of State

04-28-2006 90149 024 ****61.25

DOCUMENT # N21903

1. Entity Name

ARBOR RIDGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

479 ARBOR RIDGE LAND
TITUSVILLE FL 32780

Mailing Address

P. O. BOX 5802
TITUSVILLE FL 32783
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

59-2780079

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

PALLAY, JOSEPH P
479 ARBOR RIDGE LANE
TITUSVILLE FL 32780

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME ☐ Delete

P
PALLAY, JOSEPH P
479 ARBOR RIDGE LANE
TITUSVILLE FL 32780

TITLE NAME ☒ Delete

VP
BERTELLS, DALE
457 ARBOR RIDGE LN
TITUSVILLE FL 32780

TITLE NAME ☐ Delete

T
DECKER, ROSEMARY
486 ARBOR RIDGE LANE
TITUSVILLE FL

TITLE NAME ☒ Delete

S
PEACOCK, MIKE
485 ARBOR RIDGE LN
TITUSVILLE FL 32780

TITLE NAME ☐ Delete

D
MOON, BETH
474 DAVEY LANE
TITUSVILLE FL 32780

TITLE NAME ☐ Delete

D
SOCKS, ROBERT
493 ARBOR RIDGE LN
TITUSVILLE FL 32780

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☒ Change ☐ Addition

VP
SOCKS, ROBERT
493 ARBOR RIDGE LN
TITUSVILLE, FL 32780

TITLE NAME ☐ Change ☒ Addition

D
PAT MCGUINN
456 W.M. DAVEY LN
TITUSVILLE, FL 32780

TITLE NAME ☐ Change ☒ Addition

D
JAMES LINDSEY
506 ARBOR RIDGE LN
TITUSVILLE, FL 32780

TITLE NAME ☐ Change ☒ Addition

S
JEAN LARNEY
482 ARBOR RIDGE LN
TITUSVILLE, FL 32780

TITLE NAME ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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

Joseph P. Pallay JOSEPH P. PALLAY

April 29, 2006

313-496-4627