

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000000543

**Entity Name:** RIDGE POINTE COVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1012 RIDGE POINTE COVE  
LONGWOOD, FL 32750

**Current Mailing Address:**

1012 RIDGE POINTE COVE  
LONGWOOD, FL 32750

**FEI Number: 06-1645994**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

DIMPERIO, MICHAEL  
1012 RIDGE POINTE COVE  
LONGWOOD, FL 32750 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name DIMPERIO, MICHAEL  
Address 1012 RIDGE POINTE COVE  
City-State-Zip: LONGWOOD FL 32750

Title T  
Name DAY, DEBORAH  
Address 1015 RIDGE POINTE COVE  
City-State-Zip: LONGWOOD FL 32750

Title S  
Name MOXLEY, MAUREEN  
Address 1036 RIDGE POINTE COVE  
City-State-Zip: LONGWOOD FL 32750

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: MICHAEL J DIMPERIO**

**PRESIDENT**

**04/13/2014**

Electronic Signature of Signing Officer/Director Detail

Date