

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000005606

**Entity Name:** SILVER RIDGE OF DELAND HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Feb 15, 2022**  
**Secretary of State**  
**0330484807CC**

**Current Principal Place of Business:**

125 E. INDIANA AVE. SUITE C  
DELAND, FL 32724

**Current Mailing Address:**

125 E. INDIANA AVE. SUITE C  
DELAND, FL 32724 US

**FEI Number: 06-1723346**

**Certificate of Status Desired: No**

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

PMI PROPERTY SOLUTIONS  
125 E. INDIANA AVE. SUITE C  
DELAND, FL 32724 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: TERESA SCHWARZ**

**02/15/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY/TREASURER  
Name WALLACE, JUDY  
Address 125 E. INDIANA AVE. SUITE C  
City-State-Zip: DELAND FL 32724

Title PRESIDENT  
Name WOLFE, MADDIE  
Address 125 E. INDIANA AVE. SUITE C  
City-State-Zip: DELAND FL 32724

Title VP  
Name BEAUREGARD, RICHARD  
Address 125 E. INDIANA AVE. SUITE C  
City-State-Zip: DELAND FL 32724

Title DIRECTOR  
Name BOOKER, GARY  
Address 125 E. INDIANA AVE. SUITE C  
City-State-Zip: DELAND FL 32724

Title DIRECTOR  
Name SPAULDING, TERRI  
Address 125 E. INDIANA AVE. SUITE C  
City-State-Zip: DELAND FL 32724

*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: MADDIE WOLFE**

**PRESIDENT**

**02/15/2022**

Electronic Signature of Signing Officer/Director Detail

Date