

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000005606

**FILED**  
**Jan 09, 2017**  
**Secretary of State**  
**CC4765612613**

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

**Current Principal Place of Business:**

1 RIDGE TRAIL  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

P.O. BOX 4257  
ORMOND BEACH, FL 32175-4257 US

**FEI Number: 06-1723346**

**Certificate of Status Desired: No**

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

ALBANESE HOLLANDER, INC.  
1 RIDGE TRAIL  
ORMOND BEACH, FL 32174 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:** ADRIANA ALBANESE

01/09/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FLINT, GRETCHEN  
Address P.O. BOX 4257  
City-State-Zip: ORMOND BEACH FL 32175-4257

Title S, VP  
Name MCKENZIE, BETH  
Address P.O.BOX 4257  
City-State-Zip: ORMOND BEACH FL 32175-4257

Title T  
Name COE, LAURA  
Address P.O.BOX 4257  
City-State-Zip: ORMOND BEACH FL 32175-4257

*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:** GRETCHEN FLINT

**PRESIDENT**

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date