| above, or on an attachment with all other like empowered. | |
|---|-----------|
| SIGNATURE: AMY DUFFY | PRESIDENT |

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

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 | : AMY DUFFY | | | 04/30/2019 |
|---------------------------|-----------------|--|-----------------|-----------------|------------|
| | | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | | |
| | Title | P, VP | Title | T, S | |
| | Name | DUFFY, AMY | Name | DUFFY, BARBARA | |
| | Address | 113 HURST COURT | Address | 113 HURST COURT | |
| | City-State-Zip: | DELAND FL 32724 | City-State-Zip: | DELAND FL 32724 | |

DELAND, FL 32724 US

FEI Number: 82-1675337

Name and Address of Current Registered Agent:

Current Mailing Address:

113 HURST COURT DELAND, FL 32724

113 HURST COURT DELAND, FL 32724 US

DUFFY, AMY 113 HURST COURT

2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N1700004656

Current Principal Place of Business:

Entity Name: SOUTH RIDGE VILLAS TWO HOMEOWNERS ASSOCIATION, INC.

Electronic Signature of Signing Officer/Director Detail

FILED

Apr 30, 2019

Secretary of State 4859931206CC

Certificate of Status Desired: No

04/30/2019

Date