2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N18000007059

Entity Name: NORTHRIDGE ESTATES HOMEOWNERS ASSOCIATION, INC.

FILED Jun 01, 2024 Secretary of State 8710866008CC

NORTH RIDGE ESTATES HOA

ASST. SECRETARY

Current Principal Place of Business:

C/O NPG FINANCIAL SERVICES INC. 4700 MILLENIA BLVD STE 500 FIFTH FLOOR ORLANDO, FL 32839

Current Mailing Address:

NORTH RIDGE ESTATES HOA 109 AMBERSWEET WAY STE 764 DAVENPORT, FL 33897 US

FEI Number: 83-1594058 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

NPG FINANCIAL SERVICES INC. NPG FINANCIAL SERVICES INC. 4700 MILLENIA BLVD STE 500 FIFTH FLOOR ORLANDO, FL 32839 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: CHRISTOPHER ANTHONY LOPEZ 06/01/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title AGENT PRESIDENT

Name LOPEZ, CHRISTOPHER ANTHONY Name BRIDGES, RHEAH LORD

Address Address NPG FINANCIAL SERVICES INC.

109 AMBERSWEET WAY STE 764 4700 MILLENIA BLVD STE 500 FIFTH

City-State-Zip: DAVENPORT FL 33897 **FLOOR**

ORLANDO FL 32839 City-State-Zip: VΡ Title

Title **SECRETARY** Name DEGALE, RONALD

Name MARTINEZ. RENEE Address NORTH RIDGE ESTATES HOA

109 AMBERSWEET WAY STE 764

Address NORTH RIDGE ESTATES HOA City-State-Zip: DAVENPORT FL 33897 109 AMBERSWEET WAY STE 764

City-State-Zip: DAVENPORT FL 33897

CIPOLLONE, ANGELA Name Title **TREASURER**

NORTH RIDGE ESTATES HOA Address Name AMSTER, SHANNA

109 AMBERSWEET WAY STE 764 NORTH RIDGE ESTATES HOA

Title

Address City-State-Zip: DAVENPORT FL 33897 109 AMBERSWEET WAY STE 764

DAVENPORT FL 33897 City-State-Zip:

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.

06/01/2024 SIGNATURE: CHRISTOPHER ANTHONY LOPEZ **AGENT**