

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21903

Entity Name: ARBOR RIDGE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**465 LM DAVEY LANE
TITUSVILLE, FL 32780**Current Mailing Address:**465 LM DAVEY LANE
TITUSVILLE, FL 32780 US**FEI Number:** 59-2780079**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEWITT, JOYCE
515 ARBOR RIDGE LANE
TITUSVILLE, FL 32780 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:** JOYCE DEWITT

02/01/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DEWITT, JOYCE
Address 515 ARBOR RIDGE LN
City-State-Zip: TITUSVILLE FL 32780

Title TREASURER
Name PALLAY, JOSEPH
Address 479 ARBOR RIDGE LANE
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name SCHNEIDER, ROBERT
Address 481 LM DAVEY LANE
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name FLEMING, ANN
Address 489 LM DAVEY LANE
City-State-Zip: TITUSVILLE FL 32780

Title V P
Name DIRSCHKA, PAM
Address 495 ARBOR RIDGE LANE
City-State-Zip: TITUSVILLE FL 32780

Title SECRETARY
Name PALLAY, JOSEPH
Address 479 ARBOR RIDGE LANE
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name JERRY, THOVSON
Address 501 LM DAVEY LANE
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name OGDEN, RICHARD
Address 490 LM DAVEY LANE
City-State-Zip: TITUSVILLE FL 32780

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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: JOSEPH P PALLAY

TREASURER

02/01/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DEWITT, BOB
Address 515 ARBOR RIDGE LANE
City-State-Zip: TITUSVILLE FL 32780

Title DIRECTOR
Name WILLIAMS, RON
Address 507 ARBOR RIDGE LANE
City-State-Zip: TITUSVILLE FL 32780