

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

DOCUMENT# N37408

**FILED  
Jan 21, 2017  
Secretary of State  
CC8121981530**

**Entity Name:** ROCKRIDGE PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

550 16TH STREET  
CLUBHOUSE  
VERO BEACH, FL 32960

**Current Mailing Address:**

PO BOX 162  
VERO BEACH, FL 32961-0162 US

**FEI Number:** 59-2367798

**Certificate of Status Desired:** No

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

THOMPSON, DEBRA S.  
550 16TH STREET  
CLUBHOUSE  
VERO BEACH, FL 32960 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:** DEBRA S. THOMPSON

01/21/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            THOMPSON, DEBRA S.  
Address        PO BOX 162  
City-State-Zip: VERO BEACH FL 32961-0162

Title            VP  
Name            GERMANO, ANTHONY R. JR.  
Address        PO BOX 162  
City-State-Zip: VERO BEACH FL 32961-0162

Title            SECRETARY  
Name            WITMAN, BARBAR J  
Address        PO BOX 162  
City-State-Zip: VERO BEACH FL 32961-0162

Title            BOARD MEMBER  
Name            MULDER, BERNIE  
Address        PO BOX 162  
City-State-Zip: VERO BEACH FL 32961-0162

Title            BOARD MEMBER  
Name            MULDER, BEVERLY  
Address        PO BOX 162  
City-State-Zip: VERO BEACH FL 32961-0162

Title            BOARD MEMBER  
Name            VAN STEDUM, HERMAN  
Address        PO BOX 162  
City-State-Zip: VERO BEACH FL 32961-0162

Title            BOARD MEMBER  
Name            WITMAN, MIKE  
Address        PO BOX 162  
City-State-Zip: VERO BEACH FL 32961-0162

*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:** DEBRA S THOMPSON

**PRESIDENT**

01/21/2017

Electronic Signature of Signing Officer/Director Detail

Date