DOCUMENT# N93000002242	

## Entity Name: STONERIDGE LANDING ASSOCIATION OF INVERNESS, INC.

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### **Current Principal Place of Business:**

5491 S. STONERIDGE DR. INVERNESS. FL 34450

### **Current Mailing Address:**

5491 S. STONERIDGE DR. INVERNESS. FL 34450 US

# FEI Number: 59-3182514

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

SLAYMAKER, THOMAS E 2218 HIGHWAY 44 WEST INVERNESS, FL 34450 US

Certificate of Status Desired: Yes

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:

Electronic Signature of Registered Agent

#### **Officer/Director Detail :**

Title	PRESIDENT	Title	SECRETARY
Name	RIKE, BILL	Name	KOLTZ, CATHY
Address	5533 S LANDING TERRACE	Address	5410 S LANDING TERRACE
City-State-Zip:	INVERNESS FL 34450	City-State-Zip:	INVERNESS FL 34450
Title	TREASURER	Title	DIRECTOR AT LARGE
Name	MCQUILLIN, ALLAN W	Name	MITCHELL, JIM
Address	5435 S WINGED ELM WAY	Address	5501 S STONERIDGE DR
City-State-Zip:	INVERNESS FL 34450	City-State-Zip:	INVERNESS FL 34450
Title	DIRECTOR AT LARGE		
Name	FERREN, GAIL		
Address	5486 S WINGED ELM WAY		
City-State-Zip:	INVERNESS FL 34450		

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: ALLAN W. MCQUILLIN

TREASURER

03/29/2021 Date

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Mar 29, 2021 Secretary of State 3963866071CC