

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002518

Entity Name: ROCK SPRINGS RIDGE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1000 PINE HOLLOW POINT
ALTAMONTE SPRINGS, FL 32714**Current Mailing Address:**1000 PINE HOLLOW POINT
ALTAMONTE SPRINGS, FL 32714 US**FEI Number:** 59-3511407**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JORDAN, BRETT M
1000 PINE HOLLOW POINT
ALTAMONTE SPRINGS, FL 32714 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DIRECTOR
Name	OLSEN, RODNEY
Address	1000 PINE HOLLOW POINT
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	VP
Name	FILES, MICHAEL
Address	1000 PINE HOLLOW POINT
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	PRESIDENT
Name	GREENE, JAMES
Address	1000 PINE HOLLOW POINT
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	D
Name	GLOVER, RAYMOND
Address	1000 PINE HOLLOW POINT
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

Title	T, SECRETARY
Name	SCHAFRATH, JERRY
Address	1000 PINE HOLLOW POINT
City-State-Zip:	ALTAMONTE SPRINGS FL 32714

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: JAMES GREENE**PRESIDENT****06/03/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date