

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H52187

FILED
Feb 20, 2015
Secretary of State
CC2105720946

Entity Name: RIDGEWOOD PARK MOBILE HOMEOWNERS OF VENICE, INC.

Current Principal Place of Business:

% WILLIAM R. KORP
ONE SARASOTA TOWER TWO NORTH TAMIAMI TRAIL SUITE 500
SARASOTA, FL 34236

Current Mailing Address:

% WILLIAM R. KORP
ONE SARASOTA TOWER TWO NORTH TAMIAMI TRAIL SUITE 500
SARASOTA, FL 34236 US

FEI Number: 59-1971735

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KORP, WILLIAM R.
ONE SARASOTA TOWER
TWO NORTH TAMIAMI TRAIL SUITE 500
SARASOTA, FL 34236 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 PRESIDENT
Name STONE, SUSAN E.
Address 316 JACARANDA CIRCLE W.
City-State-Zip: VENICE FL 34285

Title VICE PRESIDENT
Name BORDON, ROBERT
Address 225 TANDELO PL. E.
City-State-Zip: VENICE FL 34285

Title SECRETARY
Name MANN, JANICE
Address 261 IXORA CIRCLE W.
City-State-Zip: VENICE FL 34285

Title D.
Name CONNELLY, ROBERT
Address 246 TANGELO PL. E.
City-State-Zip: VENICE FL 34285

Title D.
Name WOOD, FRED
Address 261 816 JACARANDA CIRCLE S.
City-State-Zip: VENICE FL 34285

Title D.
Name POIST, JACK
Address 840 ALLAMANDA CIRCLE S.
City-State-Zip: VENICE FL 34285

Title D.
Name HERALD, RICHARD JR
Address 791 IXORA CIRCLE
City-State-Zip: VENICE FL 34285

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUSAN E. STONE

PRESIDENT

02/20/2015

Electronic Signature of Signing Officer/Director Detail

Date