

DOCUMENT # 705637

1. Entity Name

THE COMMUNITY CENTER OF RIDGE MANOR, INC.

FILED
Mar 27, 2000 8:00 am
Secretary of State

03-27-2000 90084 025 ****70.00

Principal Place of Business

Mailing Address

34240 CORTEZ BLVD.
RIDGE MANOR FL 33525

34240 CORTEZ BLVD.
RIDGE MANOR FL 33523-8974

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2340835

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FISHER, BRUCE B
35117 WHISPERING OAKS
RIDGE MANOR FL 33532

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MILLER, PAULINE
STREET ADDRESS 5067 LAKEWOOD DRIVE
CITY-ST-ZIP RIDGE MANOR FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME SHOPPA, JOHN J.
STREET ADDRESS 35052 SMOKE TREE LN
CITY-ST-ZIP RIDGE MANOR FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DS
NAME CUMMINGS, BONNIE
STREET ADDRESS 35046 SMOKE TREE LANE
CITY-ST-ZIP RIDGE MANOR FL 33523

TITLE DS
NAME Fitzwater, Gale
STREET ADDRESS 35139 Whispering Oaks Blvd.
CITY-ST-ZIP Ridge Manor, FL. 33523-9419

TITLE VPD
NAME BOYD, ROBERT
STREET ADDRESS 34405 ORCHID PKWY
CITY-ST-ZIP RIDGE MANOR FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME BUCKINGHAM, RICHARD M.
STREET ADDRESS 33449 OHIO AVENUE
CITY-ST-ZIP RIDGE MANOR FL

TITLE DT
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD
NAME SANDERS, LEONARD
STREET ADDRESS 5583 FAIRWAY DR.
CITY-ST-ZIP RIDGE MANOR FL

TITLE
NAME Fisher, Bruce G.
STREET ADDRESS 35117 Whispering Oaks Blvd.
CITY-ST-ZIP Ridge Manor, FL. 33523-9419

12. I hereby certify that the information supplied with this filing does not qualify for the exemption indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bruce G. Fisher (BRUCE G. FISHER) 3-23-00 352-583-3466
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR 1 (017) (RNF)