

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 19, 2002 8:00 am**  
**Secretary of State**

03-19-2002 90031 011 \*\*\*\*61.25

**DOCUMENT # 729003**

1. Entity Name Ridge Electronic Services Assoc. Inc.  
507 S Lake Parker Ave.  
Lakeland, Florida 33801

**DO NOT WRITE IN THIS SPACE**

**425238**

2. Principal Place of Business  
507 S. Lake Parker Ave.  
Suite, Apt. #, etc.  
Lakeland, Fl.  
City & State

3. Mailing Address  
SAME  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

Zip 33801 Country USA

Zip Country

4. FEI Number  
591869399

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name Munson, Peter J.

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

1701 S Florida Ave

City Lakeland **FL** Zip Code 33801

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

**FEE IS \$61.25**  
**Initial or Amended UBR**

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**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>P Brandt, Walter S</u> <u>123400 Havendale Blvd</u> <u>Winter Haven, Fl 33881</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>V Darby, Ronnie</u> <u>1261 34th St. N.W.</u> <u>Winter Haven, Fl. 33881</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>S Scott, Candy</u> <u>5075 Lake Parker Dr.</u> <u>Lakeland, Fl. 33801</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>D Reddick, Cal</u> <u>920 W. Lake Cannon Dr.</u> <u>Winter Haven, Fl. 33881</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>D Johnson, William</u> <u>219 E. Central Ave</u> <u>Lake Wales, Fl. 33853</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>D Barry, Ray</u> <u>1925 Hallam Dr</u> <u>Lakeland, Fl. 33813</u>

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 on an attachment with an address, with all other like empowered.

**SIGNATURE:** Cal Reddick **CAL REDDICK**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-20-02 (813) 299-4850  
Date Daytime Phone #

CR2E037B (12/01)