

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000002768

FILED  
Aug 11, 2002  
Secretary of State

**Entity Name:** EASTRIDGE LOT OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PMB # 272  
614 E. HWY 50  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

PMB # 272  
614 E. HWY 50  
CLERMONT, FL 34711

**New Mailing Address:**

**FEI Number:** 91-2084888

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAMMON, FRANK M  
301 N. U.S. HWY. 27, STE. G  
CLERMONT, FL 34711

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DIEM, JOHN  
Address: 936 SCENIC VIEW CIRCLE  
City-St-Zip: CLERMONT, FL 34711

Title: STD ( ) Delete  
Name: SANTUCCI, DAVID  
Address: 936 SCENIC VIEW CIRCLE  
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete  
Name: TERVO, DANIEL  
Address: 886 SCENIC VIEW CIRCLE  
City-St-Zip: CLERMONT, FL 34711

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DANIEL TERVO

D

08/11/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date