2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N0000005228

1. Entity Name

ABERDEEN AT KINGS RIDGE NEIGHBORHOOD ASSOCIATION . INC.



FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90217 002 ****61.25

Principal Pla	ce of Business	3	Maili	ng Address									
2180 WEST SR 434			2180	2180 WEST SR 434									
SUITE 5000			SUITE	5000									
LONGWOOD F	FL 32779-5044		LONG	WOOD FL 32779-5044					114 66 111 68 411 68 41 86 11	1 00(1) OBIGI DICIG	10848-018	101 1011 16E1	
2. Principal Place of Business				3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES					
City & Sta	ite	C	City & State				4. FEI Number 59-3695939 Applied For						
				<u> </u>								t Applicable	
Zip Country						Country		5. Certificate of St	atus Desired		5 Add		
								Fee Required					
	6. Name	and Address of Current	t Register	red Agent		Nama		7. Name and Add	ress of New Regi	stered Agent			
						Name							
HART, JAMES W JR				Street Ad			ddress (P.O. Box Number is Not Acceptable)						
SENTRY MANAGEMENT, INC.													
	sr 434, sui												
LONGWOOD FL 32779-5044						City Zip C					p Code	<u> </u>	
ı					-	O,ty				FL Z	p 000.	•	
		submits this statement f	or the pur	pose of changing its r	egistere	ed office o	r registere	ed agent, or both, in	the State of Florida	a. I am familia	r with, a	and accept	
the obliga	ations of registe	ered agent.											
SIGNATURE													
	Signature, typed	or printed name of registered agen	t and title if ap	oplicable. (NOTE:	Registered	d Agent signat	ture required	when reinstating)		DATE			
•	EILE NOW	: FEE IS \$61.25		9. Election Cam	paign F	inancing		\$5.00 May Be	Make	Check Pay	able	to	
-	FILE NOW	FEE 13 301.23		Trust Fund Co	ntributi	on.		Added to Fees		Departmen			
										•		•	
10.		OFFICERS AND DI	RECTORS	S	11.			DDITIONS/CHANG	ES TO OFFICERS /	AND DIRECTO	DRS IN	10	
TITLE	DP			☐ Delete	TITLE		V/D			□ CI	nange	Addition	
NAME	HACKER, E	E BING			NAM		ECKE	RT, TERRY					
STREET ADDRESS	1900 KING	s ridge blvd			STRE	ET ADDRESS	1900	KINGS RIDG	GE BLVD.				
CITY-ST-ZIP	CLERMON				`CITY-	ST-ZIP	CLER	MONT, FL 34	711				
TITLE	VD			X Delete	TITLE		T/D		·	ПС	nange	X Addition	
NAME	HUNTER, I	IALL			NAME			RMARK, CHRI	STINE				
STREET ADDRESS		S RIDGE BLVD			STRE	ET ADDRESS		KINGS RIDG					
CITY-ST-ZIP	CLERMON				CITY-	ST-ZIP		MONT, FL 34					
TITLE	TD			X Delete	TITLE		VELA	HIVITI 9 1 L JE	L (1 1		nange	Addition	
NAME	SELLERS,	JEFF		APT Delete	NAME						ango		
STREET ADDRESS	1900 KING	S RIDGE BLVD				ET ADDRESS							
CITY-ST-ZIP	CLERMON					ST-ZIP							
	OLLINION	1 1 5 97/11		□ n-1	-						nnar		
TITLE NAME				☐ Delete	TITLE					□ CI	iange	☐ Addition	
STREET ADDRESS					NAME	: T address							
CITY-ST-ZIP						ST-ZIP							
					1								
TITLE				☐ Delete	TITLE					☐ CF	ange	☐ Addition	
NAME					NAME				٠.				
STREET ADDRESS CITY-ST-ZIP						ET ADORESS ST-ZIP							
					= ('11'Y_	S1.70							

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

ا SIGNATURE: ا

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

E SOME LEGISTER LECKOR

☐ Delete

3-0.03 352-212-1192

☐ Change

☐ Addition

CR2E037 (10/0)