2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2004
Secretary of State

DOCUMENT# N02000002443

Entity Name: NORTH RIDGE ADVISORY BOARD, INC.

Current Principal Place of Business:

255 S. ORANGE AVENUE
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

255 S. ORANGE AVENUE
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 01-0676166 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BONIFAY, CECELIA
255 S. ORANGE AVENUE
ORLANDO, FL 32801

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:	SCOTT, MARK	
Address:	101 SPANISH MOSS ROAD	
City-St-Zip:	DAVENPORT, FL 33837	
Title:	VD	( ) Delete
Name:	ARNONE, GREG	
Address:	1250 EAST HALLANDALE BEACH BLVD., STE 300	
City-St-Zip:	HALLANDALE, FL 33009	
Title:	STD	( ) Delete
Name:	MCKNIGHT, WARREN	
Address:	P.O. BOX 708	
City-St-Zip:	DAVENPORT, FL 33836	
Title:	D	( ) Delete
Name:	CARNES, TIMOTHY M	
Address:	P.O. BOX 1059	
City-St-Zip:	DAVENPORT, FL 33836	
Title:	D	( ) Delete
Name:	SMITH, KELLY ESQ.	
Address:	255 S. ORANGE AVE., SUITE 800	
City-St-Zip:	ORLANDO, FL 32801	
Title:	D	( ) Delete
Name:	JACKSON, T. GLENN	
Address:	P.O. BOX 813	
City-St-Zip:	WINDERMERE, FL 34286	

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:	
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: MARK SCOTT PD 01/06/2004

Electronic Signature of Signing Officer or Director — Date