2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2000 8:00 am
Secretary of State
02-04-2000 90013 021 ****61.25

DOCUMENT # N07155

1. Entity Name

RIDGEMOOR MASTER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2595 TAMPA RD STE H PALM HARBOR FL 34684 US	2595 TAMPA RD STE H PALM HARBOR FL 34684-3130 US

U0014530

DO NOT WRITE IN THIS SPACE

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 59-2540599 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ULRICH, EUGENE C
2595 TAMPA RD
STE H
PALM HARBOR FL 34684

7. Name and Address of New Registered Agent

Name: Jeff Rudkin
Street Address (P.O. Box Number is Not Acceptable): 2595 Tampa Road
Suite H
City: Palm Harbor **FL** Zip Code: 34684

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 R.J. Rudkin 01-28-'00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FLYNN, DONALD 4349 WORTHINGTON CIR PALM HARBOR FL 34684	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Verdon, Coleen 4204 Rotherham Court Palm Harbor, Fl 34685	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD POHN, SHARON 3111 GLENRIDGE DR PALM HARBOR FL 34684	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Pohn, Sharon 3111 Glenridge Dr. Palm Harbor, Fl 34685	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SMITH, PEGGY 5685 WELLINGTON DR PALM HARBOR FL 34684	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Smith, Peggy 5685 Wellington Dr. Palm Harbor, Fl. 34685	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD TORRES, JUAN 4452 WORTHINHTON DR PALM HARBOR FL 34684	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FRASCELLA, MICHAEL 5482 GREYSTON PALM HARBOR FL 34684	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Alldredge, Dabney 4128 Salem Square Parkway Palm Harbor Fl 34685	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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.

SIGNATURE: SIGNATURE REQUIRED Jan-26-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #