## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N09092

(0)

Mailing Address

SILVER RIDGE HOMEOWNERS' ASSOCIATION, INC.

## **FILED** Apr 22 1998 8:00am Secretary of State

52 E SOUTH ST ORLANDO FL 32		52 E SOUTH ST ORLANDO FL 32801				3. Date Incorporated or Qualified			
US		US				05/06/1985 4. FEI Number	I	plied For	
								t Applicable	
2. Principal Pl	ace of Business	2a. Mailing Ad	Idress			59-2563243			
21 26						5. Certificate of Status Desired	S8.75 Additional Fee Required		
Suite, Apt. #, etc.			#, etc.			6. Election Campaign Financing \$5.00 May Be			
22 27						Trust Fund Contribution			
├──¬			City & State			7. Is this nonprofit corporation a homeowners association?			
23	28				X Yes ☐ No				
Zip	Country	<b>├</b> ₁ ′	Zip Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. XYes \( \square\) No			
24	26	29		30		Personal Property Tax due June 30.		7 140	
<del></del>	9. Name and Address of Curr	eut Hedistelen Adel	<u></u>	81	Name	To. Hame and Address of New Negistated A	Beilt		
				٠.	, vanc				
	DON ASHER & ASSOCIATES INC				82 Street Address (P.O. Box Number is Not Acceptable)				
52 E \$0l				63					
ORLANDO	O FL 32801			53				I	
				84	City		<b>85</b> Zip (	Code	
					L	<u> </u>	1		
11. Pursuant t office or re agont I at	to the provisions of Sections 617.0! egistered agent, or both, in the Sta m familiar with, and accept the obl	502 and 617.1508, FI ite of Florida. Such ch igations of, Section 6	orida Statute iange was a 17.0503, Flo	es, the abov authorized b orida Statute	e-named y the corp s.	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the apporation's	intment as	registered registered	
SIGNATURE									
-	Styruline typod or printed name of registered of		(NOTI		ont signature	e required when reinstating) DATE	DIDECTOR		
12.	OFFICERS A	ND DIRECTORS	<u> </u>	13.		ADDITIONS/CHANGES TO OFFICERS AND	Change	S IN 12 Addition	
TITLE	D	اعملا	DELETE	1.1 TITLE		*B	Z_1 Change	L.J. Addition	
NAME	MCCARTY, THOMAS			1.2 NAME		Greene, Johnny			
STREET ADDRESS	2813 DANFORTH DRIVE			1.3 STREE	T ADDRESS	7656 Warden Drive			
CITY - ST - ZiP	ORLANDO FL		<i>/</i>	1.4 CHTY -	ST-ZIP	Orlando, FL 32818	<b>7</b> 1	T 4.100	
TITLE	DVP		DELETE	2.1 TITLE		VPD '	Change	Addition	
NAME	BRANCH, SAM			2.2 NAME	!	Branch, Sam			
STREET ADDRESS	2642 SILVER RIDGE DR			2.3 STHEE	ADDRESS	2642 Silver Ridge Drive			
CITY-ST-ZIP	ORLANDO FL			2 4 City-	ST - ZIP	Au14- ET 22010			
MILE	DT		DELETE	3 1 TITLE		DT	Change	Addition	
NAME	GARCIA, ED			32 NAME		Dillion, Carol			
STREET ADDRESS	2962 SILVER RIDGE DR			3.3 STRÉE	T ADDRESS	7720 Colebrook Dr.			
CITY-ST-ZIP	ORLANDO FL			3.4. CITY-	ST-ZIP	0.1 1 77 00040	<del>-</del>		
TITLE	DP	Z	DELETE	4.1 TITLE			<b>C</b> hange	Addition	
NAME	OELSCHLAGER, ERIC			4. 2 NAME		SD Harris 11 I doubt			
STREET ADDRESS	7354 BORDWINE DR			4.3 STREE	T ADDRESS	Harrell, Linda			
CITY - ST - ZIP	ORLANDO FL		/	4.4 CITY -	ST - ZIP	2713 Foxwood	rest		
TITLE	STD	Z	DELETE	5.1 TITLE		02200000	Change	☐ Addition	
NAME	HOETGER, ANDREW			5.2 NAME		D			
STREET ADDRESS	7713 COLEBROOK DRIVE			5.3 STREE	T ADDRESS	Harris, Steward			
CITY-ST-79P	ORLANDO FL			54 CITY-	ST-7IP	7 <sup>11</sup> 25 Stidham			
TIFLE	D	Z	DELETE	6.1 TITLE		Orlando, FL 32818	Change	☐ Addition	
NAME	MAROSAN, MARIANE			6.2 NAME		<u> </u>			
STREET ADDRESS	3008 GOLDEN ROCK DRIVE			6.3 STREE	T ADDRESS				
C4TV - QT - 780	ORI ANDO EL			6.4 City-	S1 - ZiP				
14. I hereby o	certify that the information supplied	with this filing does	not qualify for	or the exem	otion state	ed in Section 119.07(3)(i), Florida Statutes. I further cel	tify that the	information	

indicated on this armual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Whomy L. Dreene

Johnny L. Greene