2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 8:00 am
Secretary of State
04-26-2000 90202 021 ****61.25

DOCUMENT # N14978

1. Entity Name
RIDGECREST MOBILE HOME OWNERS ASSOCIATION, INC.

B0073457

Principal Place of Business	Mailing Address
633 SILVERSTREAM CIR. FT. PIERCE, FL. 34946 US	SAME

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number: NOT APPLICABLE — ☐ Applied For ☒ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STELLA MISURALE 312 SILVERSTREAM CIRCLE FT. PIERCE, FL. 34946	Name: THOMAS A. SPINELLO SR. Street Address (P.O. Box Number is Not Acceptable): 633 SILVERSTREAM CIRCLE City: FT. PIERCE FL Zip Code: 34946

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: THOMAS A. SPINELLO SR. PRESIDENT — 4/14/2000
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	Pres RICHARD MERELLO 213 SILVER STREAM CIRCLE FT. PIERCE, FLA. 34946 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT THOMAS A. SPINELLO SR. 633 SILVERSTREAM CIRCLE FT. PIERCE, FLA. 34946 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice Pres ANDY LAZAR 335 FUR TERRACE FT. PIERCE, FLA. 34946 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT AL PUMA 662 SILVERSTREAM CIRCLE FT. PIERCE, FLA. 34946 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREA STELLA MISURALE 312 SILVERSTREAM CIRCLE FT. PIERCE, FLA. 34946 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER/SECRETARY GREG OSTROWSKI 395 SILVERSTREAM CIRCLE FT. PIERCE, FLA. 34946 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sec. JUNE SMITH 129 SILVERSTREAM CIRCLE FT. PIERCE, FLA. 34946 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR CHARLES MILLER 287 ACORN FT. PIERCE, FLA. 34946 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director TOM SPINELLO 333 PECAN PLACE FT. PIERCE, FLA. 34946 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR CHARLES PETERSON 451 SILVERSTREAM CIRCLE FT. PIERCE, FLA. 34946 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director VICTOR CORSINO 255 SILVERSTREAM CIRCLE FT. PIERCE, FLA. 34946 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR RAYMOND RYAN 2440 SKYLARK FT. PIERCE, FLA. 34946 ☒ 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: THOMAS A. SPINELLO SR. PRESIDENT — 4/14/2000 — 561-460-9743
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Thomas A. Spinello Sr.