

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 14, 2001 8:00 am
Secretary of State

09-14-2001 90007 034 ****61.25

DOCUMENT # N27021

1. Entity Name

RIDGEWOOD ACRES HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

**3665 S. ORLANDO DR.
 SUITE 146
 SANFORD FL 32473
 US**

Mailing Address

**3665 S. ORLANDO DR.
 SUITE 146
 SANFORD FL 32473
 US**

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

59-2952929

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**NIKOLIC, ALEKSANDAR
 3665 S ORLANDO DR
 SANFORD FL 32773**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9-11-07

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

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

TITLE NAME ☐ Delete
DPA
NIKOLIC, ALEKSANDAR
 STREET ADDRESS **3665 S. ORLANDO DR., SUITE 146**
 CITY-ST-ZIP **SANFORD FL 32773**

TITLE NAME ☐ Delete
DST
SINISA, NIKOLIC
 STREET ADDRESS **3665 S. ORLANDO DR., SUITE 146**
 CITY-ST-ZIP **SANFORD FL 32773**

TITLE NAME ☒ Delete
DT
SPOGNARDI, MICHAEL S
 STREET ADDRESS **439 RIDGE FOREST COURT**
 CITY-ST-ZIP **LAKE FOREST IL 32771**

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Change ☒ Addition
TATJANA NIKOLIC
 STREET ADDRESS **3665 S ORLANDO DRIVE**
 CITY-ST-ZIP **SANFORD, FL 32773, TREASURER**

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
 STREET ADDRESS
 CITY-ST-ZIP

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

9-11-01

407-321-5644

CR2E037 (5/01)