

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # **1039069**

1. Entity Name **Woodridge Estates North Sixty
Homeowners Association, Inc.**

02 JUL -5 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

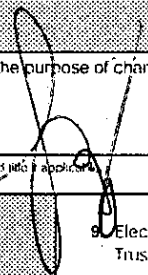
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-07/11/02--01024--021
****122.50 ****122.50

2. Principal Place of Business Seaboard Arbores Suite, Apt. #, etc. 5313 Locust Place City & State New Port Richey, FL Zip 34652 Country USA		3. Mailing Address Seaboard Arbores Suite, Apt. #, etc. 5313 Locust Place City & State New Port Richey, FL Zip 34652 Country USA	
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DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number 593050365		Applied For ☐ Not Applicable
	5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent Name Steven H. Mezer Street Address (P.O. Box Number is Not Acceptable) 220 South Franklin St. City Tampa FL Zip Code 33602		
	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  **STEVEN H. MEZER**
Signature, typed or printed name of registered agent and fee is applicable (NOTE: Registered Agent signature required when reinstating)

6/10/02
DATE

FEE IS \$81.25
Initial or Amended UBR

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 STREET ADDRESS CITY-ST-ZIP	President (P) (b) Vincent Digregorio 7421 Ashmore Dr. New Port Richey, FL 34653
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President (V) (b) Dave Akeley 7221 Skyview Ave New Port Richey, FL 34653
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary (S) (b) Darren Porter 7323 Ashmore Dr. New Port Richey, FL 34653
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer (T) (b) Mac Donald 7234 Ashmore Dr. New Port Richey, FL 34653
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	300006327539--1 -07/11/02--01024--022 *****8.75 *****8.75
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CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

 **Vincent Digregorio**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/02
DATE

Daytime Phone: #

95 7/4/02