

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N46720

(1)

1. Corporation Name

GENESIS COMMUNITIES OF RIDGEWOOD HOME OWNER'S ASSOCIATION, INC.



Principal Place of Business

P.O. BOX 700  
ELLENTON FL 34222

Mailing Address

7019 DATE PALM LANE  
ELLENTON FL 34222  
US

3. Date Incorporated or Qualified  
01/07/1992

3a. Date of Last Report  
03/15/1995

2. Principal Place of Business

2a. Mailing Address

21 3315 Woody Court

4. FEI Number  
65-0301554

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23 Zip Country

28 Ellementon FL Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

24 34222 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARVEY, WILLIAM H  
7019 DATE PALM LANE  
ELLENTON FL 34222

81 Name Jensen, David  
82 Street Address (P.O. Box Number is Not Acceptable)  
3315 Woody Court  
83  
84 City Ellementon FL 85 Zip Code 34222

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE DAVID H. JENSEN PRESIDENT

(NOTE: Registered Agent signature required when reinstating)

2/8/96

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME HARVEY, WILLIAM H  
STREET ADDRESS 7019 DATE PALM LANE  
CITY-ST-ZIP ELLENTON FL 34222 ☒ DELETE

1.1 TITLE P  
1.2 NAME JENSEN, DAVID ☐ Change ☒ Addition  
1.3 STREET ADDRESS 3315 WOODY COURT  
1.4 CITY-ST-ZIP ELLENTON, FL 34222

TITLE VP  
NAME IRONS, GERI  
STREET ADDRESS 6913 COCONUT GROVE CR  
CITY-ST-ZIP ELLENTON FL 34222 ☒ DELETE

2.1 TITLE VP  
2.2 NAME PICKETT, JOHN ☐ Change ☒ Addition  
2.3 STREET ADDRESS 3004 SABAL CIRCLE  
2.4 CITY-ST-ZIP ELLENTON, FL 34222

TITLE T  
NAME BALDWIN, DON  
STREET ADDRESS 3008 PINDO PALM PLACE  
CITY-ST-ZIP ELLENTON FL 34222 ☒ DELETE

3.1 TITLE T  
3.2 NAME NIGRO, MARY ☐ Change ☒ Addition  
3.3 STREET ADDRESS 3004 KIWI PLACE  
3.4 CITY-ST-ZIP ELLENTON, FL 34222

TITLE S  
NAME OGAR, LOUISE  
STREET ADDRESS 6711 JOHN AVE  
CITY-ST-ZIP ELLENTON FL 34222 ☐ DELETE

4.1 TITLE D  
4.2 NAME WEINMANN, MAXINE ☐ Change ☒ Addition  
4.3 STREET ADDRESS 3014 SABLE CIRCLE  
4.4 CITY-ST-ZIP ELLENTON, FL 34222

TITLE D  
NAME JENSON, DAVE  
STREET ADDRESS 3315 WOODY CT  
CITY-ST-ZIP ELLENTON FL 34222 ☒ DELETE

5.1 TITLE D  
5.2 NAME EBERL, PHYLLIS ☐ Change ☒ Addition  
5.3 STREET ADDRESS 3115 RIDGEWOOD BLVD.  
5.4 CITY-ST-ZIP ELLENTON, FL 34222

TITLE D  
NAME MACRAE, LESLIE  
STREET ADDRESS 3008 KIWI PL  
CITY-ST-ZIP ELLENTON FL 34222 ☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual 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 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 12 or Block 13 changed, or on an attachment with an address.

SIGNATURE:

Signature and typed or printed name of signing officer or director

2/8/96 (941) 722-4338  
Date Daytime Phone

CR2E037 (12/95)