

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 08, 1999 8:00 am
Secretary of State

04-08-1999 90018 038 ****61.25

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1. Corporation Name

RIDGECREST COMMUNITY SERVICES, INC.

Principal Place of Business

12601 130TH AV N
LARGO FL 33774
US

Mailing Address

P.O. BOX 816
LARGO FL 34649-0816



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

3. Date Incorporated or Qualified

02/15/1993

4. FEI Number

59-3170323

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

HARRISON, MARY L
19738 GULF BLVD
INDIAN SHORES FL 34635

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE CPD
NAME HARRISON, MARY L
STREET ADDRESS 19738 GULF BLVD
CITY-ST-ZIP INDIAN SHORES FL

TITLE VCVD ☐ DELETE

NAME STEELE, SHIRLEY
STREET ADDRESS 609 2ND ST
CITY-ST-ZIP INDIAN SHORES FL

TITLE DT ☐ DELETE

NAME CUNNINGHAM, ROY
STREET ADDRESS 12340 MONARCH CIRCLE
CITY-ST-ZIP SEMINOLE FL

TITLE D ☐ DELETE

NAME SHIELDS, BETTY
STREET ADDRESS 920-14TH ST, SW
CITY-ST-ZIP LARGO FL

TITLE SD ☒ DELETE

NAME HURM, DEE
STREET ADDRESS 12537 83RD AVE N
CITY-ST-ZIP SEMINOLE FL 33776

TITLE D ☐ DELETE

NAME PAUL, JOANNE
STREET ADDRESS 12485 MONROE CT APT B
CITY-ST-ZIP LARGO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ROY CUNNINGHAM
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-99

Date

727-596-9777

Daytime Phone #

CR2E037 (4/1/98)