2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State
01-30-2001 90128 040 ****61.25

DOCUMENT # N96000006492

1. Entity Name

THE RIDGES MAINTENANCE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
GABLES PROPERTY MGMNT 3300 CORPORATE AVE #110 FORT LAUDERDALE FL 33331	GABLES PROPERTY MGMNT 3300 CORPORATE AVE #110 FORT LAUDERDALE FL 33331

DO NOT WRITE IN THIS SPACE

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 65-0729978 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ZIFRONY, MATTHEW ESQ
C/O TRIPP SCOTT P.A.
110 SE 6TH STREET, 15TH FLOOR
FORT LAUDERDALE FL 33301

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

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	PD WERTMAN, JEFFREY 3992 PINEWOOD LN WESTON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ~~BUCCHIERZ~~ Bucchiere, STEVE 4299 BREENBRIAR LN WESTON FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HABIB, MONA 4307 FOX HOLLOW WESTON FL 33327	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD STARMAN, ELLIOTT 3640 HERON RIDGE WESTON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D IRLET, ANDERSON 3767 OAKRIDGE CR WESTON FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Gregg Kerness 4052 Pine Ridge Lane Weston FL 33331 ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARRY, AMY 3952 MARTTU CT WESTON FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Sue Susman 3773 Oak Ridge Lane Weston FL 33331 ☐ Change ☑ Addition

CR2E037 (10/00)

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: Matthew Zifrony FEI/Title Starman 1/8/01 305-895-0202
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #