

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 8:00 am
Secretary of State

02-16-2004 90047 005 ****61.25

DOCUMENT # N96000006492

1. Entity Name
THE RIDGES MAINTENANCE ASSOCIATION, INC.



Principal Place of Business
**GABLES PROPERTY MGMT
3300 CORPORATE AVE #110
FORT LAUDERDALE, FL 33331**

Mailing Address
**GABLES PROPERTY MGMT
3300 CORPORATE AVE #110
FORT LAUDERDALE, FL 33331**

24011223



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01062004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
65-0729978

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROSEN & EICHNER, PA
2500 WESTON ROAD, SUITE 220
WESTON, FL 33331**

Name **Bakalar, Brough & Chadrow, P.A.**

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

150 South Pine Island Rd # 540

City **Plantation**

FL

Zip Code **33324**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

DAVID L. BROWST, ESQ.

(NOTE: Registered Agent signature required when reinstating)

2/11/04
DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Delete
NAME **WERTMAN, JEFFREY**
STREET ADDRESS **3992 PINWOOD LN**
CITY-ST-ZIP **WESTON, FL**

TITLE **PD** ☒ Change ☐ Addition
NAME **Wertman, Jeffrey**
STREET ADDRESS **3300 Corporate Ave, #110**
CITY-ST-ZIP **Weston FL 33331**

TITLE **VD** ☐ Delete
NAME **BUCCHIERE, STEVE**
STREET ADDRESS **4299 BREENBRIAR LN**
CITY-ST-ZIP **WESTON, FL 33327**

TITLE **VD** ☒ Change ☐ Addition
NAME **Bucchiere, Steve**
STREET ADDRESS **3300 Corporate Ave, #110**
CITY-ST-ZIP **Weston FL 33331**

TITLE **SD** ☐ Delete
NAME **HABIB, MONA**
STREET ADDRESS **4307 FOX HOLLOW**
CITY-ST-ZIP **WESTON, FL 33327**

TITLE **SD** ☒ Change ☐ Addition
NAME **Habib, Mona**
STREET ADDRESS **3300 Corporate Ave, #110**
CITY-ST-ZIP **Weston FL 33331**

TITLE **TD** ☐ Delete
NAME **STARMAN, ELLIOTT**
STREET ADDRESS **3640 HERON RIDGE**
CITY-ST-ZIP **WESTON, FL**

TITLE **TD** ☒ Change ☐ Addition
NAME **Starman, Elliott**
STREET ADDRESS **3300 Corporate Ave, #110**
CITY-ST-ZIP **Weston FL 33331**

TITLE **D** ☐ Delete
NAME **KERNESS, GREGG**
STREET ADDRESS **4052 PINERIDGE LN**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33331**

TITLE **D** ☒ Change ☐ Addition
NAME **Kerness, Gregg**
STREET ADDRESS **3300 Corporate Ave, #110**
CITY-ST-ZIP **Weston FL 33331**

TITLE **D** ☐ Delete
NAME **CLEIN, STEVE**
STREET ADDRESS **4181 STAGHORN LANE**
CITY-ST-ZIP **FORT LAUDERDALE, FL 33331**

TITLE **D** ☒ Change ☐ Addition
NAME **Clein, Steve**
STREET ADDRESS **3300 Corporate Ave, #110**
CITY-ST-ZIP **Weston FL 33331**

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/04 954-525-9900
Date Daytime Phone #