2000 UNIFORM BUSINESS REPORT, (UBR) FILED DOCUMENT # N97000000313 Apr 04, 2000 8:00 am Secretary of State 1. Éntitý Name RIDGE MANOR MOBILE HOMEOWNERS ASSOC. INC. 04-04-2000 90015 040 \*\*\*\*61.25 Principal Place of Business Mailing Address 1301 Polk City Road, Lot 140 1301 Polk Cty Rd. Lot 140 Haines City, FL. 33844 Haines City FL. 33844 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0733008 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired  $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Gregory A. Sanoba Street Address (P.O. Box Number is Not Acceptable) 114 East Edgewood Drive Lakeland, FL. 33803-4015 Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be andri (\* - Schrieb) a Richer (Richer) Trust Fund Contribution. FEL IO 90123 Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD Addition ☐ Delete TITLE Change NAME Jack Aberegg NAME STREET ADDRESS STREET ADDRESS 1301 Polk City Rd, Lot 151 CITY-ST-ZIP CITY-ST-ZIP Haines City, FL. 33844 Addition A TITLE Change ☐ Delete VPD TITLE NAME NAME Leo Wymer STREET ADDRESS STREET ADDRESS 1301 Polk City Road, Lot 176 CITY-ST-ZIP CITY-ST-7IP Haines City, FL. 33844 \_\_\_\_Addition NAME Elsie McClellan STREET ADDRESS STREET ADDRESS 1301 Polk City Rd, Lot 140 CITY-ST-ZIP CITY-ST-ZIP Haines City, FL. 33844 ☐ Change TITLE ☐ Addition TITLE NAME NAME Patsy McKenney STREET ADDRESS STREET ADDRESS 1301 Polk City Road, Lot 28 CITY-ST-ZIP CITY-ST-ZIP Haines City, FL. 33844 **Addition** ☐ Change TITLE NAME NAME Marlene Andrews STREET ADDRESS STREET ADDRESS 1301 Polk City Rd, Lot 38. CITY-ST-ZIP CITY-ST-ZIP Haines City, FL. 33844 ■ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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: Clause

(863) 421-7237

3-26-00