2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2000 8:00 am
Secretary of State
05-21-2000 90006 033 ****61.25

DOCUMENT # N97000004671

1. Entity Name

SPRING RIDGE HOME OWNERS ASSOCIATION INC OF ORAN

Principal Place of Business	Mailing Address
P O BOX 2272 APOPKA FL 32704	P O BOX 2272 APOPKA FL 32704-2272

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 59-3461569 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MENARD, RICHARD D
1122 OLYMPIC CT
APOPKA FL 32712

7. Name and Address of New Registered Agent

Name: Michelle Neuman
Street Address (P.O. Box Number is Not Acceptable): 1100 Ozark Ct
City: Apopka **FL** Zip Code: 32712

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: Michelle Neuman Michelle Neuman - President 4/30/00
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 PEER, CHERYL 142 OLYMPIC CT APOPKA FL 30712	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Michelle Neuman 1100 Ozark Ct Apopka FL 32712	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HAWLEY, CAROL 1227 ADIRON DACK CT APOPKA FL 32712	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Amy Miotti 1101 Ozark Ct Apopka FL 32712	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VTD MEWARD, RICHARD D 1122 OLYMPIC CT APOPKA FL 32712	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Lissie Lebron 1251 adirondak Ct Apopka FL 32712	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BONILLA, RAFAEL 1264 HIMILAYAN CT APOPKA FL 32712	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Brenda Arledge 1141 Ozark Ct Apopka FL 32712	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WARD, TRAVERS 1273 HIMILAYAN CT APOPKA FL 32712	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Kim Mangum 1209 Himalayan Ct Apopka FL 32712	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Mike Portilla 1243 Adirondak Ct Apopka, FL 32712	☐ Change ☒ Addition

CR2E037 (9/99)

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: Michelle Neuman Michelle Neuman 4/30/00 (407)654-0026
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #