

2001 UNIFORM BUSINESS REPORT (UBR)

4/5

FILED
May 17, 2001 8:00 am
Secretary of State

04-05-2001 90016 046 ***158.75

DOCUMENT # **N97000004671**

1. Entity Name

Spring Ridge Homeowners Association of Orange County

Principal Place of Business

Mailing Address

**P.O. Box 2272
 Apopka FL 32704**

2. Principal Place of Business

3. Mailing Address

**SAA.
 Suite, Apt. #, etc.
 - N/A**

**SAA.
 Suite, Apt. #, etc.
 N/A**

City & State

City & State

**Apopka FL
 Zip 32704**

**Apopka FL
 Zip 32704**

USA

4. FEL Number

593461509

☒ Applied For
☐ Not Applicable

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

**Michelle Neuman
 1100 Ozark Ct.
 Apopka FL 32712**

Name **Brenda Arledge**

Street Address (P.O. Box Number is Not Acceptable)
1141 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

Brenda Arledge

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

(NOTE: Registered Agent signature required when reinstating)

3-22-01

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	☒ Delete
NAME	Michelle Neuman	
STREET ADDRESS	1100 Ozark Ct.	
CITY-ST-ZIP	Apopka FL 32712	
TITLE	Vice President	☒ Delete
NAME	Amy Miotto	
STREET ADDRESS	1101 Ozark Ct.	
CITY-ST-ZIP	Apopka FL 32712	
TITLE	Secretary	☐ Delete
NAME	Brenda Arledge	
STREET ADDRESS	1141 Ozark Ct.	
CITY-ST-ZIP	Apopka FL 32712	
TITLE	Treasurer	☒ Delete
NAME	Lissie Lebron	
STREET ADDRESS	1251 Adirondack Ct	
CITY-ST-ZIP	Apopka FL 32712	
TITLE	Board Member	☒ Delete
NAME	Ismael Portilla	
STREET ADDRESS	1243 Adirondack Ct.	
CITY-ST-ZIP	Apopka FL 32712	
TITLE	Board Member	☐ Delete
NAME	Kim Mangum	
STREET ADDRESS	1209 Himalayan Ct.	
CITY-ST-ZIP	Apopka FL 32712	

TITLE	President	☐ Change ☒ Addition
NAME	Ellis Kim Quee	
STREET ADDRESS	1251 Adirondack Ct.	
CITY-ST-ZIP	Apopka FL 32712	
TITLE	Vice President	☒ Change ☐ Addition
NAME	Kim Mangum	
STREET ADDRESS	1209 Himalayan Ct.	
CITY-ST-ZIP	Apopka FL 32712	
TITLE	Secretary/Treasurer	☒ Change ☐ Addition
NAME	Brenda Arledge	
STREET ADDRESS	1141 Ozark Ct.	
CITY-ST-ZIP	Apopka FL 32712	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Brenda Arledge

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-22-01 (407) 814-7358

CR2E034 (11/00)