

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000000839

1. Entity Name

CEDAR RIDGE PROPERTY OWNERS ASSOCIATION, INC.

**FILED**  
**May 08, 2000 8:00 am**  
**Secretary of State**

05-08-2000 90214 032 \*\*\*\*61.25

Principal Place of Business

1088 OLD COVENTRY CT  
 OVIEDO FL 32765

Mailing Address

1088 OLD COVENTRY CT  
 OVIEDO FL 32765-6871

2. Principal Place of Business

1540 Barbara's Place

Suite, Apt. #, etc.

3. Mailing Address

1540 Barbara's Place

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Fernandina Bch.Fl

City & State

Fernandina Bch.Fl

4. FEI Number

59-3524727

Applied For

Not Applicable

Zip  
 32034

Country  
 Nassau

Zip  
 32034

Country  
 Nassau

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

DOUGLAS, GREGORY S  
 1088 OLD COVENTRY CT  
 OVIEDO FL 32765

7. Name and Address of New Registered Agent

Name

George Bridges, A

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

1540 Barbara's Place

Fernandina Beach

City

FL

Zip Code

32034

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

TITLE PD ☒ Delete  
 NAME DOUGLAS, A B  
 STREET ADDRESS 3462 OLD NASSAUVILLE RD  
 CITY-ST-ZIP FERNANDINA BEACH FL 32034

TITLE VD ☒ Delete  
 NAME DOUGLAS, STEVEN M  
 STREET ADDRESS 4576 MULBERRY CREEK DR.  
 CITY-ST-ZIP EVANS GA 30809

TITLE TSD ☒ Delete  
 NAME DOUGLAS, GREG S  
 STREET ADDRESS 1088 OLD COVENTRY CT  
 CITY-ST-ZIP OVIEDO FL 32763

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition  
 NAME Sanford, Roger, L  
 STREET ADDRESS 1516 Barbara's Place  
 CITY-ST-ZIP Fernandina Bch Fl. 32034

TITLE VP.D. ☒ Change ☐ Addition  
 NAME Bridges, George, A  
 STREET ADDRESS 1540 Barbara's Place  
 CITY-ST-ZIP Fernandina Bch Fl. 32034

TITLE T.S.D. ☒ Change ☐ Addition  
 NAME Sanford, Joyce, S  
 STREET ADDRESS 1516 Barbara's Place  
 CITY-ST-ZIP Fernandina Bch Fl 32034

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:

*Sanford, Joyce*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sanford, Joyce

4/26/00

904-321-2760

Date

Daytime Phone #

CR2E037 (9/99)