

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000005228

**Entity Name:** ABERDEEN AT KINGS RIDGE NEIGHBORHOOD ASSOCIATION, INC.

**FILED**  
**Apr 25, 2024**  
**Secretary of State**  
**4768192564CC**

**Current Principal Place of Business:**

6972 LAKE GLORIA BLVD.  
ORLANDO, FL 32809-3200

**Current Mailing Address:**

6972 LAKE GLORIA BLVD.  
ORLANDO, FL 32809-3200 US

**FEI Number: 59-3695939**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LELAND MANAGEMENT  
6972 LAKE GLORIA BLVD.  
ORLANDO, FL 32809-3200 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MAURY, STEVEN C  
Address        3674 ROLLINGBROOK ST  
City-State-Zip: CLERMONT FL 34711

Title            VP  
Name            KOSHOREK, LARRY  
Address        3485 ROLLINGBROOK ST  
City-State-Zip: CLERMONT FL 34711

Title            TREASURER  
Name            ADAMS, HARRY  
Address        6972 LAKE GLORIA BLVD.  
City-State-Zip: ORLANDO FL 32809-3200

Title            SECRETARY  
Name            VIOLA, LOUIS  
Address        6972 LAKE GLORIA BLVD  
City-State-Zip: ORLANDO FL 32809

Title            DIRECTOR  
Name            COMFORT, JOHN  
Address        6972 LAKE GLORIA BLVD.  
City-State-Zip: ORLANDO FL 32809-3200

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: STEVEN C MAURY**

**PRESIDENT**

**04/25/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date