

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000000135

**Entity Name:** REGAL RIDGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

13900 COUNTY ROAD 455  
SUITE 107 #346  
CLERMONT,FL, FL 34711

**Current Mailing Address:**

13900 COUNTY ROAD 455  
SUITE 107 #346  
CLERMONT,FL, FL 34711 US

**FEI Number:** 51-0464410

**Certificate of Status Desired:** No

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

COMMUNITY ASSOCIATION MANAGEMENT OF LAKE COUNTY INC.  
13900 COUNTY ROAD 455  
SUITE 107 #346  
CLERMONT,FL, FL 34711 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:** CATHY BLANKENSHIP

04/30/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY, TREASURER  
Name WASHINGTON, BRENDA  
Address 13900 COUNTY ROAD 455  
SUITE 107 #346  
City-State-Zip: CLERMONT,FL FL 34711

Title PRESIDENT  
Name ALLEN, ALICIA V.  
Address 13900 COUNTY ROAD 455  
SUITE 107 #346  
City-State-Zip: CLERMONT,FL FL 34711

Title VP  
Name WHITE, LESLEY  
Address 13900 COUNTY ROAD 455  
SUITE 107 #346  
City-State-Zip: CLERMONT,FL FL 34711

*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:** ALICIA ALLEN

PRESIDENT

04/30/2019

Electronic Signature of Signing Officer/Director Detail

Date