

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2006 8:00 am
Secretary of State

02-07-2006 90029 004 ****61.50



DOCUMENT # 754226
 1. Entity Name
RIDGE GROVES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
 13250 RIDGE RD. 13250 RIDGE RD.
 #10-6 #10-6
 LARGO FL 33778 LARGO FL 33778



2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

1st MOORE CR2E037 (10/05)

City & State City & State

4. FEI Number 59-2090790 Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
NELSON, BARBARA
13250 RIDGE RD
4A7
LARGO FL 33778

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE: *Barbara Nelson* President of Condo Assoc. 1-24-06
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
Due By May 1, 2006 ONLY

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	NELSON, BARBARA	
STREET ADDRESS	13250 RIDGE RD 4A7	
CITY-ST-ZIP	LARGO FL 33778	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	MORRISSEY, THOMAS	
STREET ADDRESS	13250 RIDGE RD #6A4	
CITY-ST-ZIP	LARGO FL 33778	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	KLUECK, MARTIN	
STREET ADDRESS	13250 RIDGE RD 4A1	
CITY-ST-ZIP	LARGO FL 33778	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	MANSFIELD, JEANNE	
STREET ADDRESS	13250 RIDGE RD 8-6	
CITY-ST-ZIP	LARGO FL 33778	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HACKER, CHARLES	
STREET ADDRESS	13250 RIDGE RD 4A2	
CITY-ST-ZIP	LARGO FL 33778	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	TD	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	GECALDINE TRUMAN		
STREET ADDRESS	13250 RIDGE RD 1-8		
CITY-ST-ZIP	LARGO, FL 33778		
TITLE	SD	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	JOYCE SCHWALBACH		
STREET ADDRESS	13250 RIDGE RD 9-1		
CITY-ST-ZIP	LARGO, FL 33778		
TITLE	D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	RICHARD JARMYS		
STREET ADDRESS	13250 RIDGE RD 5A6		
CITY-ST-ZIP	LARGO, FL 33778		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Barbara Nelson* BARBARA NELSON 1-727-501-1846