2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003622

FILED Feb 02, 2009 Secretary of State

Entity Name: ARNOLD RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

97064 CASTLE RIDGE DR 97352 CASTLE RIDGE DR

YULE, FL 32097 YULE, FL 32097

Current Mailing Address: New Mailing Address:

P.O. BOX 1111

YULEE, FL 320411111

FEI Number: 59-3744777 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MUNNS, RICHARD
97064 CASTLE RIDGE DR
YULE, FL 32097 US

VAN DEN HEEVER, ALFRID
97352 CASTLE RIDGE DR
YULE, FL 32097 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: ALFRID VAN DEN HEEVER 02/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: MUNNS, RICHARD Name: PIERCE, DONALD

 Address:
 97064 CASTLE RIDGE
 Address:
 97017 CASTLE RIDGE

 City-St-Zip:
 YULE, FL 32097
 City-St-Zip:
 YULE, FL 32097

 Title:
 TD
 () Delete
 Title:
 TD
 (X) Change () Addition

 Name:
 MCSHANE, TOM
 Name:
 VAN DEN HEEVER, ALFRID

 Address:
 97201 CASTLE RIDGE DR
 Address:
 97352 CASTLE RIDGE DR

 Address:
 97201 CASTLE RIDGE DR
 Address:
 97352 CASTLE RIDG

 City-St-Zip:
 YULE, FL 32097
 City-St-Zip:
 YULE, FL 32097

Title: S () Delete Title: VD (X) Change () Addition Name: MUNNS, DOROTHY Name: KEIGHTLEY, EDWARD

Address: 97064 CASTLE RIDGE DR Address: 97088 CASTLE RIDGE DR

City-St-Zip: YULE, FL 32097 City-St-Zip: YULE, FL 32097

Title: VD (X) Delete Title: () Change () Addition Name: RICHARDSON, JUDY Name:

RICHARDSON, JUDY Name: 97037 CASTLE RIDGE DR Address: YULEE, FL 32097 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALFRID VAN DEN HEEVER VD 02/02/2009