2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21, 2005 8:00 am Secretary of State

04-21-2005 90241 025 ****61.25

| DOCUMENT # N01720 1. Entity Name THE RIDGE AT SANIBEL BAYOUS HOMEOWNER'S ASSOCIATION, INC. | | | | | | | ; rg | តក្តាធំរកក | 1 | |
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| Principal Place of Business C/O ISLAND REALTY & MANAGEMENT PO BOX 100 SANIBEL, FL 33957 US | | | Mailing Address C/O ISLAND REALTY & MANAGEMENT PO BOX 100 SANIBEL, FL 33957 US | | | | | | | |
| | and m | langenent Grove | | | | | | 61611 61611 61611 61611 6161 | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 03222005 CI | hg-NP C | R2E037 (10/03) | |
| City & State | | | City & State | | | | 4. FEI Number Applied For 59-2446382 Not Applicable | | | |
| Zip | Country | | Zip (| | Country | | 5. Certificate of Status Desired S8.75 Additional Fee Required | | | |
| | 6. Name | and Address of Current R | egistered Agent | | | | 7. Name and Address of New Registered Agent | | | |
| | EALTY & 1 00-703 TA | MANAGEMENT ARPON BAY ROAD | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | <u> </u> | City Sanibel FL Zip Code 33957 | | | | |
| the obligation of the street o | ions of regis | y submits this statement for tered agent. | 3 | Short (NOTE: Registere | -en | N | Packery | the State of Florida | // W3 | and accept |
| Filing Fee Is \$61.25 Due by May 1, 2005 9. Election Campaign Financing Trust Fund Contribution. | | | | | | | \$5.00 May Be Added to Fees | Florida | check payable to Department of St | ate |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 5289 LAC | OFFICERS AND DIRI MAN, RICHARD DYFINGER LAKE ROAD , FL 33957 | Detete | • | | | ADDITIONS/CHANG | ES TO OFFICERS | AND DIRECTORS IN Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 5308 LAD | , BRENDA DYFINGER LAKE ROAD , FL 33957 | ☐ Delete | | | Q 2 | | | Change Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | PROTHY BRELLA POOL ROAD FL 33957 | ☐ Delete | | l l | PD | | | - Ki Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | | j | VTC Mas 528 5as | d registry | er ger Lekek 33957 | □ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | 1 | 1 | | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | , NAM Stre | | | | | Change | Addition |
| indicated of the cor | on this reportion or t | e information supplied with int or supplemental report is he receiver or trustee empo- achment with an address, w | true and accurate and wered to execute this r | that my signa aport as requi | ture shall h | ave the | same legal effect as | if made under oath | ; that I am an officer | or director |

Dorothy Geis