2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009953

FILED Mar 02, 2009 Secretary of State

Entity Name: HIGH RIDGE VILLAGE HOMEOWNERS' ASSOCIATION, INC.

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

4835 SW 101ST LN 4835 SW 101ST LN OCALA, FL 34476 OCALA, FL 34476 US

Current Mailing Address: New Mailing Address:

4835 SW 101ST LN 4835 SW 101ST LN OCALA, FL 34476 OCALA, FL 34476 US

FEI Number: 51-0571290 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:

FISCHER, STEVEN P FISCHER, STEVEN D 300 SO. PINE ISLAND RD. 300 S. PINE ISLAND RD. 110 PLANTATION, FL 33324 US PLANTATION, FL 33324 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: STEVEN FISCHER 03/02/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition JONES, AUDREY COOK, AUDREY Name: Name: 4835 SW 101ST LANE Address: 4835 SW 101ST LANE Address:

City-St-Zip: OCALA, FL 34476 City-St-Zip: OCALA, FL 34476 US

Title: () Delete Title: (X) Change () Addition FISCHER, STEVEN Name: Name: FISCHER, STEVEN

Address: 300 S. PINE ISLAND RD. STE 110 Address: 300 S. PINE ISLAND RD. STE 110 City-St-Zip: FORT LAUDERDALE, FL 33324 City-St-Zip: FORT LAUDERDALE, FL 33324 US

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

Name: ZAND, MARK Name:

300 S. PINE ISLAND RD, STE 110 Address: Address: City-St-Zip: City-St-Zip: FORT LAUDERDALE, FL 33324 US

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: AUDREY COOK D 03/02/2009