

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08812

FILED  
Mar 10, 2009  
Secretary of State

**Entity Name:** WELLS RIDGE THREE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

PROFESSIONAL COMMUNITY MGT INC  
786 BLANDING VLVD #118  
ORANGE PARK, FL 32065 US

**New Principal Place of Business:**

**Current Mailing Address:**

PROFESSIONAL COMMUNITY MGT INC  
786 BLANDING VLVD #118  
ORANGE PARK, FL 32065 US

**New Mailing Address:**

**FEI Number:** 59-2564650

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PERRY, ALAN  
786 BLANDING BLVD #118  
ORANGE PARK, FL 32065 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: PONDER, DONNA  
Address: 85 DEBERRY AVE #3041  
City-St-Zip: ORANGE PARK, FL 32073

Title: TD ( ) Delete  
Name: RHODES, JEAN  
Address: 85 DEBERRY AVE #2085  
City-St-Zip: ORANGE PARK, FL 32073

Title: D ( ) Delete  
Name: RALPH, BEULAH  
Address: 85 DEBARRY AVE. #3045  
City-St-Zip: ORANGE PARK, FL 32073

Title: SD ( ) Delete  
Name: BUZZA, ALANA  
Address: 85 DE BARRY AVE #3046  
City-St-Zip: ORANGE PARK, FL 32073

Title: VD ( ) Delete  
Name: PADGETT, AMY  
Address: 85 DEBARRY AVE. #3083  
City-St-Zip: ORANGE PARK, FL 32073

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ALAN PERRY

RA

03/10/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date