

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Nov 24, 2010
Secretary of State**

DOCUMENT# N13683

Entity Name: PINE RIDGE AT SUGAR CREEK VILLAGE I CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**12029 MAJESTIC BLVD
SUITE 2
BAYONET POINT, FL 34667**New Principal Place of Business:**C/O CREATIVE MANAGEMENT
6014 US HWY 19, STE 504
NEW PORT RICHEY, FL 34652**Current Mailing Address:**12029 MAJESTIC BLVD.
SUITE 2
BAYONET POINT, FL 34667**New Mailing Address:**C/O CREATIVE MANAGEMENT
6014 US HWY 19, STE 504
NEW PORT RICHEY, FL 34652

FEI Number: 65-0014689

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:COMMUNITY MANAGEMENT PROFESSIONALS WEST
12029 MAJESTIC BLVD.
SUITE 2
BAYONET POINT, FL 34667 US**Name and Address of New Registered Agent:**KELLEY, HELEN S
C/O CREATIVE MANAGEMENT
6014 US HWY 19, STE 504
NEW PORT RICHEY, FL 34652 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: HELEN KELLEY

11/24/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: PD
Name: LEVERSO, MIKE
Address: 6014 US HWY 19, STE 504
City-St-Zip: NEW PORT RICHEY, FL 34652 USTitle: VD
Name: FLEMING, NEAL
Address: 6014 US HWY 19, STE 504
City-St-Zip: NEW PORT RICHEY, FL 34652 USTitle: TD
Name: CLEVER, JOAN
Address: 6014 US HWY 19, STE 504
City-St-Zip: NEW PORT RICHEY, FL 34652 USTitle: SD
Name: SWIFT, ARDITH
Address: 6014 US HWY 19, STE 504
City-St-Zip: NEW PORT RICHEY, FL 34652 USTitle: D
Name: PARKER, WARREN
Address: 6014 US HWY 19, STE 504
City-St-Zip: NEW PORT RICHEY, FL 34652 US

I hereby 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 all other like empowered.

SIGNATURE: HELEN KELLEY

MGR

11/24/2010

Electronic Signature of Signing Officer or Director

Date