

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43832

FILED
Jan 16, 2009
Secretary of State

Entity Name: ROYAL RIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

300 CITRUS RIDGE DR.
DAVENPORT, FL 33837 US

New Principal Place of Business:

Current Mailing Address:

300 CITRUS RIDGE DR.
8009 SOUTH ORANGE AVE
DAVENPORT, FL 33837 US

New Mailing Address:

FEI Number: 59-3191654 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KATHERINE, ANDREWS, ROYAL ASSOC.
300 CITRUS RIDGE DR.
DAVENPORT, FL 33837 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: P () Delete
Name: ANDREWS, KATHERINE
Address: 157 HIGH RIDGE DRIVE
City-St-Zip: DAVENPORT, FL 33837

Title: VP () Delete
Name: GRAVES, DAVID
Address: 3101 HUNTWICK BLVD
City-St-Zip: DAVENPORT, FL 33837

Title: D () Delete
Name: VELAZQUEZ, FERNANDO
Address: 1443 BELVOIR DR.
City-St-Zip: DAVENPORT, FL 33837

Title: S () Delete
Name: ORTIZ, WANDA
Address: 103 HIGH RIDGE DRIVE
City-St-Zip: DAVENPORT, FL 33837

Title: T () Delete
Name: BELLAS, IRENE
Address: 619 ROLLINS DRIVE
City-St-Zip: DAVENPORT, FL 33837

Title: D () Delete
Name: FITZSIMMONS, DAVID
Address: 3213 HUNTWICKE BLVD
City-St-Zip: DAVENPORT, FL 33837

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: T (X) Change () Addition
Name: FITZSIMMONS, DAVID TREASUR
Address: 3213 HUNTWICKE BLVD.
City-St-Zip: DAVENPORT, FL 33837

Title: D (X) Change () Addition
Name: LORD, LISA
Address: 3759 DARTFORD DR.
City-St-Zip: DAVENPORT, FL 33837

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: KATHERINE C. ANDREWS

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date