

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001491

FILED
Apr 07, 2004
Secretary of State

Entity Name: AZALEA RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 908
TALLAHASSEE, FL 32302

New Principal Place of Business:

178 SANDY DRIVE
SOPCHOPPY, FL 32358

Current Mailing Address:

3225 E. LAKESHORE DR.
TALLAHASSEE, FL 32312 US

New Mailing Address:

178 SANDY DRIVE
SOPCHOPPY, FL 32358 US

FEI Number: 59-3176862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEEKS, BETTY
3225 E. LAKESHORE DR.
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

TEDDER, SANDY D
178 SANDY DRIVE
SOPCHOPPY, FL 32358 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: SANDY TEDDER

04/07/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WEEKS, BETTY W.
Address: 3225 E. LAKESHORE DR
City-St-Zip: TALLHASSEE, FL

Title: STD () Delete
Name: TEDDER, SANDRA D.
Address: 2134 FILMORE ROAD
City-St-Zip: TALLHASSEE, FL

Title: D () Delete
Name: LINDA SUE WEEKS,
Address: 3280 RUE DE LAFITTE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TEDDER, SAM
Address: 178 SANDY DRIVE
City-St-Zip: SOPCHOPPY, FL 32358

Title: STD (X) Change () Addition
Name: TEDDER, SANDY
Address: 178 SANDY DRIVE
City-St-Zip: SOPCHOPPY, FL 32358

Title: D (X) Change () Addition
Name: LOUIS (ROCKY) ROCCO,
Address: P. O. BOX 12
City-St-Zip: PANACEA, FL 32346

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SAM TEDDER

PD

04/07/2004

Electronic Signature of Signing Officer or Director

Date