

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003007

FILED
Apr 26, 2007
Secretary of State

Entity Name: ROBIN'S RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 11421
PENSACOLA, FL 325241421

New Principal Place of Business:

112 REDBREAST LANE
PENSACOLA, FL 325037071 US

Current Mailing Address:

P.O. BOX 11421
PENSACOLA, FL 325241421

New Mailing Address:

FEI Number: 59-3243027 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EASLET, RONDA
120 REDBREAST LANE
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

JACKSON, BEN
112 REDBREAST LANE
PENSACOLA, FL 32503 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: BEN JACKSON

04/26/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JACKSON, BEN
Address: 112 REDBREAST LANE
City-St-Zip: PENSACOLA, FL 32503 US

Title: VPD () Delete
Name: WILLOUGHBY, JAMES
Address: 6039 SONGBIRD DRIVE
City-St-Zip: PENSACOLA, FL 32503 US

Title: SD () Delete
Name: SEELMAN, SARAH
Address: 116 REDBREAST LANE
City-St-Zip: PENSACOLA, FL 32503 US

Title: TD (X) Delete
Name: EASLEY, RONDA
Address: 120 REDBREAST LANE
City-St-Zip: PENSACOLA, FL 32503

Title: D (X) Delete
Name: HEADINGTON, NICOLE
Address: 6000 SONGBIRD DRIVE
City-St-Zip: PENSACOLA, FL 32503 US

Title: D (X) Delete
Name: KENNEDY, DAVID
Address: 6047 SONGBIRD DRIVE
City-St-Zip: PENSACOLA, FL 32503 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: MCCLELLAN, JUDY C
Address: 6046 SONGBIRD DRIVE
City-St-Zip: PENSACOLA, FL 32503 US

Title: TD (X) Change () Addition
Name: JACKSON, PRISCILLA K
Address: 112 REDBREAST LANE
City-St-Zip: PENSACOLA, FL 32503 US

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: BEN JACKSON

PD

04/26/2007

Electronic Signature of Signing Officer or Director

Date