
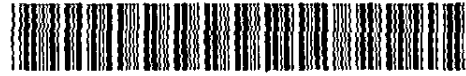


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # N96000005374 1. Entity Name RIDGE MANOR NEWS, INC.	
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Principal Place of Business 33277 CORTEZ BLVD. RIDGE MANOR FL 33523	Mailing Address 33277 CORTEZ BLVD. RIDGE MANOR FL 33523
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2. Principal Place of Business	3. Mailing Address	
Suite, Apt #, etc.	Suite, Apt. #, etc.	1st MOORE CR2E037 (10/05)
City & State	City & State	4. FEI Number 59-2865921
Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BRAND, VICTORIA 33277 CORTEZ BLVD. RIDGE MANOR FL 33523

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE Victoria Brand 3/22/06

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
TITLE	P HALL, MELVIN	<input type="checkbox"/>
STREET ADDRESS	5125 WESTLAKE BLVD.	
CITY-ST-ZIP	RIDGE MANOR FL 33523	
TITLE	VP	<input type="checkbox"/>
NAME	BOYD, ROBERT	
STREET ADDRESS	34405 ORCHID PKWY	
CITY-ST-ZIP	RIDGE MANOR FL 33523	
TITLE	S	<input type="checkbox"/>
NAME	LEHECKA, THOMAS	
STREET ADDRESS	34405 CEDARFIELD DR	
CITY-ST-ZIP	RIDGE MANOR FL 33523	
TITLE	D	<input type="checkbox"/>
NAME	DIFILIPPO, CAROL	
STREET ADDRESS	33431 ORCHID PKWY	
CITY-ST-ZIP	RIDGE MANOR FL 33523	
TITLE	D	<input type="checkbox"/>
NAME	SLUSARZ, MECEDES	
STREET ADDRESS	6096 FAIRWAY DR	
CITY-ST-ZIP	RIDGE MANOR FL 33523	
TITLE	D	<input type="checkbox"/>
NAME	MILLER, PAULINE	
STREET ADDRESS	5067 LAKEWOOD DR	
CITY-ST-ZIP	RIDGE MANOR FL 33523	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE	000000447965	<input type="checkbox"/>
NAME	03/08/06-80078-001 61.25	
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11, if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Victoria Brand 3/22/06 352-583-26