

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2007 08:00 AM
Secretary of State



DOCUMENT # N96000005374
1. Entity Name
RIDGE MANOR NEWS, INC.

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 - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/06)

City & State	City & State
Zip	Country
Zip	Country

4. FEI Number 59-2865921	Applied For <input type="checkbox"/> Not Applicable
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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
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P HALL, MELVIN 5125 WESTLAKE BLVD. RIDGE MANOR FL 33523	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition U00000632331 02/21/07-80017-023 61.25
	<input type="checkbox"/> Delete		
TITLE	VP BOYD, ROBERT 34405 ORCHID PKWY RIDGE MANOR FL 33523	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		
TITLE	S LEHECKA, THOMAS 34405 CEDARFIELD DR RIDGE MANOR FL 33523	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		
TITLE	D DIFILIPPO, CAROL 33431 ORCHID PKWY RIDGE MANOR FL 33523	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		
TITLE	D SLUSARZ, MECEDES 6096 FAIRWAY DR RIDGE MANOR FL 33523	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		
TITLE	D MILLER, PAULINE 5067 LAKEWOOD DR RIDGE MANOR FL 33523	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		

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* **2/5/07** (352) 583-4335
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR