


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2008 8:00 am
Secretary of State

02-27-2008 90003 044 ****61.25

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		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2865921	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BRAND, VICTORIA 33277 CORTEZ BLVD. RIDGE MANOR, FL 33523			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		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	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HALL, MELVIN	NAME			
STREET ADDRESS	5125 WESTLAKE BLVD.	STREET ADDRESS			
CITY-ST-ZIP	RIDGE MANOR, FL 33523	CITY-ST-ZIP			
TITLE	VP <input checked="" type="checkbox"/> Delete	TITLE	VP <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BOYD, ROBERT	NAME	Jay Davis		
STREET ADDRESS	34405 ORCHID PKWY	STREET ADDRESS	33277 Cortez Blvd.		
CITY-ST-ZIP	RIDGE MANOR, FL 33523	CITY-ST-ZIP	Ridge Manor, Florida 33523		
TITLE	S <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LEHECKA, THOMAS	NAME			
STREET ADDRESS	34405 CEDARFIELD DR	STREET ADDRESS			
CITY-ST-ZIP	RIDGE MANOR, F; 33523	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DIFILIPPO, CAROL	NAME			
STREET ADDRESS	33431 ORCHID PKWY	STREET ADDRESS			
CITY-ST-ZIP	RIDGE MANOR, FL 33523	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SLUSARZ, MECEDES	NAME	Jeremy White		
STREET ADDRESS	6096 FAIRWAY DR	STREET ADDRESS	7345 RiverviewDr.		
CITY-ST-ZIP	RIDGE MANOR, FL 33523	CITY-ST-ZIP	Webster, Florida 33579		
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MILLER, PAULINE	NAME			
STREET ADDRESS	5067 LAKEWOOD DR	STREET ADDRESS			
CITY-ST-ZIP	RIDGE MANOR, FL 33523	CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Victoria Brand</i>		2/25/08		352-583-4225	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	