## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000006921

FILED Mar 27, 2009 Secretary of State

Entity Name: REMINGTON AT KINGS RIDGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 327795044 **Current Mailing Address: New Mailing Address:** 2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 327795044 FEI Number: 59-3577459 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HART, JAMES W JR SENTRY MANAGEMENT, INC. 2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 327795044 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition ZAREK. ED ZAREK, ED Name: Name: 2333 HAMPSTEAD AVE Address: 2333 HAMPSTEAD AVE Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711 Title: Title: ( ) Delete () Change () Addition MCKENNA, JIM Name: Name: Address: 4225 GREENWICH CT Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: PD(X) Delete Title: () Change () Addition HIGGINS, JOHN Name: Name: Address: 2349 HAMPSTEAD AVE Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition Name: BROLEY, BOB Name: Address: 2234 FENTON AVE Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: Title: () Delete Title: SD (X) Change ( ) Addition HARTLEY, HANK Name: Name: HARTLEY, HANK 2328 HAMPSTEAD AVE 2328 HAMPSTEAD AVE Address: Address: City-St-Zip: CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711 Title: () Delete Title: ( ) Change (X) Addition CAMPBELL, MARY Name: Name: Address: Address: 4237 GREENWICH CT CLERMONT, FL 34711 City-St-Zip: 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: ED ZAREK PD 03/27/2009