

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000059528

FILED
Jun 21, 2004
Secretary of State

Entity Name: SOUTHRIDGE PROPERTIES, INC.

Current Principal Place of Business:

COUNTY ROAD 561
TAVARES, FL 32778 US

New Principal Place of Business:

Current Mailing Address:

4117 COUNTY ROAD 561
TAVARES, FL 32778 US

New Mailing Address:

FEI Number: 59-3359850 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STONE, LEWIS W
4850 N HWY 19A
MOUNT DORA, FL 32757 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: BUTTERFIELD, CRAIG
Address: 14595 ROLLERCOASTER RD
City-St-Zip: COLORADO SPRINGS, CO 80921

Title: VP () Delete
Name: BERENS, PATRICIA
Address: 6755 ROUND LAKE ROAD
City-St-Zip: MOUNT DORA, FL 32757

Title: VP () Delete
Name: BERENS, THOMAS
Address: 81275 W 43RD PLACE
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICIA BERENS

VP

06/21/2004

Electronic Signature of Signing Officer or Director

_____ Date