FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07, 1999 8:00 am
Secretary of State
05-07-1999 90125 012 ****61.25

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1. Corporation Name
CEDAR RIDGE COMMUNITY ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7000 HIGH RIDGE RD. LANTANA FL 33462-5006	7000 HIGH RIDGE RD. LANTANA FL 33462-5006

2. Principal Place of Business 21	2a. Mailing Address 26 c/o CMD Mgt., Inc.	3. Date Incorporated or Qualifed 07/21/1997
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 3082 Jog Road	4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28 Lake Worth, FL	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 33467 Country 30 USA	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

BASILE, JOSEPH F JR.
7000 HIGH RIDGE RD.
LANTANA FL 33462-5006

10. Name and Address of New Registered Agent

81 Name: David C. Rosenthal
82 Street Address (P.O. Box Number is Not Acceptable): c/o CMD Management, Inc.
83: 3082 Jog Road
84 City: Lake Worth FL 85 Zip Code: 33467

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: DJ C. Rosenthal — 4/22/99 DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BASILE, JOSEPH F JR.		1.2 NAME	
STREET ADDRESS	5 OAKWOOD CT.		1.3 STREET ADDRESS	
CITY-ST-ZIP	LANTANA FL 33462		1.4 CITY-ST-ZIP	
TITLE	DV	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	KRICH, JEFFREY S		2.2 NAME	
STREET ADDRESS	1121 SW 18TH AVE.		2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33486		2.4 CITY-ST-ZIP	
TITLE	DST	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	FARIS, DAVID L		3.2 NAME	
STREET ADDRESS	511 S. BROADWAY		3.3 STREET ADDRESS	
CITY-ST-ZIP	LANTANA FL 33462		3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ✓ SIGNATURE REQUIRED — 4/22/99 Date — (561) 964-1550 Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (11/98)