2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004102

FILED Apr 03, 2009 Secretary of State

Entity Name: CEDAR RIDGE COMMUNITY ASSOCIATION, INC.

	rincipal Place (of Business:	New Princip	oal Place of Business:	
	EST ROAD N BEACH, FL 33	3426			
Current Mailing Address:			New Mailing	New Mailing Address:	
2950 JOG	MANAGEMENT ROAD CRES, FL 33467				
El Numbe	r: 65-0897573	FEI Number Applied For ()	FEI Number Not Applic	able () Certificate of Status Desired ()	
Name and	d Address of Cเ	ırrent Registered Agent:	Name and A	Address of New Registered Agent:	
1818 AUS SUITE 40 WEST PA The above	LM BEACH, FL	UE SOUTH 33467 US	pose of changing its	registered office or registered agent, or both,	
SIGNATU	RE:				
	Electronic	Signature of Registered Agent	t	Date	
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
itle: lame: lddress:	P ()[KING, MICHAEL 10 REDWOOD C BOYNTON BEAC		Title: Name: Address: City-St-Zip:	() Change () Addition	
ity-St-Zip:					
itle: ame: ddress:	VP ()[PASLER, GARY 210 BIRCH STRE BOYNTON BEAC		Title: Name: Address: City-St-Zip:	() Change () Addition	
itle: ame: ddress: ity-St-Zip: itle: lame: ddress:	PASLER, GARÝ 210 BIRCH STRE BOYNTON BEAC	EET H, FL 33426 Delete .E	Name: Address:	() Change () Addition () Change () Addition	
itle: lame: ddress: bity-St-Zip: itle: lame: ddress: bity-St-Zip: itle: lame: ddress: bity-St-Zip: itle: lame: ddress: bity-St-Zip:	PASLER, GARY 210 BIRCH STRE BOYNTON BEAC SEC ()[MARTIN, CAMILL 348 SPRUCE ST BOYNTON BEAC TREA ()[UNDERWOOD, I 28 MAPLEWOOD	EET H, FL 33426 Delete EH, FL 33426 Delete DANNY D CT	Name: Address: City-St-Zip: Title: Name: Address:		

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: DANNY UNDERWOOD TREA 04/03/2009