

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006460

FILED  
Mar 07, 2012  
Secretary of State

**Entity Name:** THE MANORS AT WESTRIDGE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

112 POLO PARK EAST BLVD  
DAVENPORT, FL 33897 US

**New Principal Place of Business:**

**Current Mailing Address:**

112 POLO PARK EAST BLVD  
DAVENPORT, FL 33897 US

**New Mailing Address:**

**FEI Number:** 59-3547355

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EXTREME MANAGEMENT TEAM INC  
112 POLO PARK EAST BLVD  
DAVENPORT, FL 33897 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KALTENBACH, KENNETH  
Address: 112 POLO PARK EAST BLVD  
City-St-Zip: DAVENPORT, FL 33897 US

Title: VP  
Name: GOFF, SALLIE  
Address: 112 POLO PARK EAST BLVD  
City-St-Zip: DAVENPORT, FL 33897

Title: TRES  
Name: KNOWLES, DON  
Address: 112 POLO PARK EAST BLVD  
City-St-Zip: DAVENPORT, FL 33897

Title: D  
Name: BROWN, ARTHUR  
Address: 112 POLO PARK EAST BLVD  
City-St-Zip: DAVENPORT, FL 33897

Title: D  
Name: EVANS, LISA  
Address: 112 POLO PARK EAST BLVD  
City-St-Zip: DAVENPORT, FL 33897

I hereby 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 all other like empowered.

SIGNATURE: KATHY OLDRO

AGEN

03/07/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date