

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 292232

FILED  
Jan 08, 2008  
Secretary of State

Entity Name: RIDGE SEMINOLE MANAGEMENT CORPORATION

**Current Principal Place of Business:**

8275-113TH ST. N.  
SEMINOLE, FL 33772

**New Principal Place of Business:**

**Current Mailing Address:**

8275-113TH ST. N.  
SEMINOLE, FL 33772

**New Mailing Address:**

FEI Number: 59-1101514

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAYLOR, ERIC J  
101 E. KENNEDY BOULEVARD  
SUITE 2700  
TAMPA, FL 33602 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: PEACOCK, TOMMAY T  
Address: 8330 112 ST N  
City-St-Zip: SEMINOLE, FL 33772 US

Title: SEC ( ) Delete  
Name: PEACOCK, MARIE  
Address: 8330 112 ST N  
City-St-Zip: SEMINOLE, FL 33772 US

Title: VP ( ) Delete  
Name: WILSON, LINDA  
Address: 8330 112 ST N  
City-St-Zip: SEMINOLE, FL 33772 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: PEACOCK, MARIE  
Address: 8330 112 ST N  
City-St-Zip: SEMINOLE, FL 33772 US

Title: VP (X) Change ( ) Addition  
Name: SHOTTS, GERALD D, JR  
Address: 8275-113TH ST. N.  
City-St-Zip: SEMINOLE, FL 33772 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOMMAY T. PEACOCK

DPT

01/08/2008

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

\_\_\_\_\_  
Date