2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007
Secretary of State

DOCUMENT# 692560

Entity Name: LIBERTY RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 124
WOODVILLE, FL 323620124

New Principal Place of Business:

LIBERTY RIDGE
WOODVILLE, FL 323620124

Current Mailing Address:

PO BOX 124
WOODVILLE, FL 323620124

New Mailing Address:

FEI Number: 59-3053275 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIGBY, LEE S
8830 FREEDOM ROAD
TALLAHASSEE, FL 32305 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: TD ( ) Delete
Name: RIGBY, LEE S
Address: 8830 FREEDOM ROAD
City-St-Zip: TALLAHASSEE, FL 32305

Title: PD ( ) Delete
Name: LUCAS, CHERYL
Address: 674 DUB ROAD
City-St-Zip: TALLAHASSEE, FL 32305

Title: SD ( ) Delete
Name: ROBINSON, DALE
Address: 9084 WARBLER STREET
City-St-Zip: TALLAHASSEE, FL 32305

Title: VPD ( ) Delete
Name: FORCE, PAUL E
Address: 9073 WARBLER STREET
City-St-Zip: TALLAHASSEE, FL 32305

Title: D ( ) Delete
Name: ALDERSON, DOUG
Address: 960 TOWHEE ROAD
City-St-Zip: TALLAHASSEE, FL 32305

Title: D (X) Delete
Name: LIGHTNER, PAM
Address: 755 SPIRAL GARDEN WAY
City-St-Zip: TALLAHASSEE, FL 32305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: DOUGLAS, ALDERSON
Address: 960 TOWHEE ROAD
City-St-Zip: TALLAHASSEE, FL 32305

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

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

Title: D (X) Change ( ) Addition
Name: LIGHTNER, PAM
Address: 755 SPIRAL GARDEN WAY
City-St-Zip: TALLAHASSEE, FL 32305

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 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: LEE S. RIGBY TD 04/16/2007

Electronic Signature of Signing Officer or Director — Date