

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735064

FILED
May 14, 2009
Secretary of State

Entity Name: VILLAS OF OCEAN RIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5900 OLD OCEAN BLVD.
OCEAN RIDGE, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

5900 OLD OCEAN BLVD.
OCEAN RIDGE, FL 33435 US

New Mailing Address:

FEI Number: 59-1652721 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VILLAS OF OCEAN RIDGE HOMEOWNERS
5900 OLD OCEAN BLVD
OCEAN RIDGE, FL 33435 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 () Delete
Name: FINN, NANCY
Address: 5900 OLD OCEAN BLVD #A-4
City-St-Zip: OCEAN RIDGE, FL 33435

Title: VP () Delete
Name: ASHEN, PAULA
Address: 5900 OLD OCEAN BLVD. #A-10
City-St-Zip: OCEAN RIDGE, FL 33435

Title: S () Delete
Name: CULLEN, JUDY
Address: 5900 OLD OCEAN BLVD #C-4
City-St-Zip: OCEAN RIDGE, FL 33435

Title: T () Delete
Name: TARKIINEN, HARRIET
Address: 5900 OLD OCEAN BLVD #A-8
City-St-Zip: OCEAN RIDGE, FL 33435

Title: MGRM () Delete
Name: DULWORTH, ELIZABETH J
Address: 5900 OLD OCEAN BLVD #C-3
City-St-Zip: OCEAN RIDGE, FL 33435

Title: MGRM (X) Delete
Name: SORENSON, LINDA
Address: 5900 OLD OCEAN BLVD #A-5
City-St-Zip: OCEAN RIDGE, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FOSTER, SANDY
Address: 5900 OLD OCEAN BLVD #B-2
City-St-Zip: OCEAN RIDGE, FL 33435

Title: VP (X) Change () Addition
Name: UNGER, CRAIG
Address: 5900 OLD OCEAN BLVD. #A-3
City-St-Zip: OCEAN RIDGE, FL 33435

Title: S (X) Change () Addition
Name: KERCSMAR, DAN
Address: 5900 OLD OCEAN BLVD #B-1
City-St-Zip: OCEAN RIDGE, FL 33435

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

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

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

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: SANDY FOSTER

P

05/14/2009

Electronic Signature of Signing Officer or Director

Date