

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757639

FILED
Mar 09, 2009
Secretary of State

Entity Name: RIDGE GARDEN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8249 KRISTEL CIRCLE
PORT RICHEY, FL 34668

New Principal Place of Business:

Current Mailing Address:

8249 KRISTEL CIRCLE
PORT RICHEY, FL 34668

New Mailing Address:

FEI Number: 59-2308441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITZPATRICK, SCOTT W
1601 RICKENBACKER DRIVE
SUITE 8
SUN CITY CENTER, FL 33573 US

Name and Address of New Registered Agent:

TAMPA BAY PROPERTY MANAGEMENT, INC.
8249 KRISTEL CIRCLE
PORT RICHEY, FL 34668 US

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: JAMIE K. MICK

03/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MIU, PETER
Address: P.O. BOX 766
City-St-Zip: BRANDON, FL 33509

Title: VP () Delete
Name: SANDRA, CABLE
Address: 8249 KRISTEL CIRCLE
City-St-Zip: PORT RICHEY, FL 34668

Title: ST () Delete
Name: MIU, DANIEL
Address: P.O. BOX 766
City-St-Zip: BRANDON, FL 33509

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MIU, PETER
Address: P.O. BOX 766
City-St-Zip: BRANDON, FL 33509

Title: VPRE (X) Change () Addition
Name: MADSEN, KAREN
Address: 6615 DEEB STREET #14
City-St-Zip: PORT RICHEY, FL 34668

Title: S/T (X) Change () Addition
Name: MIU, DANIEL
Address: P.O. BOX 766
City-St-Zip: BRANDON, FL 33509

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: JAMIE K. MICK

AGT.

03/09/2009

Electronic Signature of Signing Officer or Director

Date