

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764887

FILED
Mar 12, 2009
Secretary of State

Entity Name: LINTON RIDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

GALLUP ACCOUNTING
817 GEORGE BUSH BLVD
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

GALLUP ACCOUNTING
817 GEORGE BUSH BLVD
DELRAY BEACH, FL 33483 US

New Mailing Address:

FEI Number: 59-2365906

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUGH, DAVID
GALLUP ACCOUNTING
817 GEORGE BUSH BLVD
DELRAY BEACH, FL 33483 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: MUZICH, ROSE
Address: 5070 LAKE BLVD.
City-St-Zip: DELRAY BEACH, FL 33444

Title: VP () Delete
Name: DZURICK, JOSEPH
Address: 2275 LINTON RIDGE CIR A-8
City-St-Zip: DELRAY BEACH, FL 33444

Title: D () Delete
Name: PENKALSKI, JOSEPH
Address: 2754 DUNLIN ROAD
City-St-Zip: DELRAY BEACH, FL 33444

Title: S () Delete
Name: LEE, CATHY
Address: 2259 LINTON RIDGE CIR
City-St-Zip: DELRAY BEACH, FL 33444

Title: T () Delete
Name: SAINT, DIMITRI VIII
Address: 2259 LINTON RIDGE CR#6-1
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ROSE MUZICH

P

03/12/2009

Electronic Signature of Signing Officer or Director

Date