

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767680

FILED  
Mar 28, 2007  
Secretary of State

Entity Name: EAGLE RIDGE CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 32779 US

## New Principal Place of Business:

## Current Mailing Address:

2180 W SR 434  
SUITE 5000  
LONGWOOD, FL 32779 US

## New Mailing Address:

FEI Number: 59-2490000

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HART, JAMES W JR  
2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 32779 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: STD ( ) Delete  
Name: REIHL, FRED  
Address: 4235 FIELDSTONE DR  
City-St-Zip: EASTON, PA 18045

Title: PD ( ) Delete  
Name: GOSSWILLER, RICHARD  
Address: 4095 PONCHARTIAN DR  
City-St-Zip: NEW BUFFALO, MI 49117

Title: VPD ( ) Delete  
Name: FREDETTE, LARRY  
Address: 7401 TWIN EAGLE LN  
City-St-Zip: FT MYERS, FL 33912

Title: D ( ) Delete  
Name: MCCLOSKEY, HEWITT  
Address: 65 HIGH GATE LN  
City-St-Zip: BLUE BELL, PA 19422

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: REIHL, FRED  
Address: 4235 FIELDSTONE DR  
City-St-Zip: EASTON, PA 18045

Title: VPD (X) Change ( ) Addition  
Name: GOSSWILLER, RICHARD  
Address: 4095 PONCHARTIAN DR  
City-St-Zip: NEW BUFFALO, MI 49117

Title: D (X) Change ( ) Addition  
Name: FREDETTE, LARRY  
Address: 7401 TWIN EAGLE LN  
City-St-Zip: FT MYERS, FL 33912

Title: PD (X) Change ( ) Addition  
Name: MCCLOSKEY, HEWITT  
Address: 65 HIGH GATE LN  
City-St-Zip: BLUE BELL, PA 19422

Title: STD ( ) Change (X) Addition  
Name: BISHOP, JIM  
Address: 14509 AERIES WAY DR #315  
City-St-Zip: FORT MYERS, FL 33912

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

SIGNATURE: HEWITT MCCLOSKEY

PD

03/28/2007

Electronic Signature of Signing Officer or Director

Date