

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000600

FILED  
Apr 26, 2007  
Secretary of State

**Entity Name:** RANGELINE WOODS PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

145 RANGELINE WOODS COVE  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

145 RANGELINE WOODS COVE  
LONGWOOD, FL 32750

**New Mailing Address:**

**FEI Number:** 59-3623236

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VARDHAN, RENU  
145 RANGELINE WOODS COVE  
LONGWOOD, FL 32750 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: HOGAN, DEBRA  
Address: 144 RANGELINE WOODS COVE  
City-St-Zip: LONGWOOD, FL 32750

Title: S ( ) Delete  
Name: BRAUN, JULIE  
Address: 121 RANGELINE WOODS COVE  
City-St-Zip: LONGWOOD, FL 32750

Title: VP ( ) Delete  
Name: VARDHAN, DINESH  
Address: 145 RANGELINE WOODS COVE  
City-St-Zip: LONGWOOD, FL 32750

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: S (X) Change ( ) Addition  
Name: PATEL, BINISH  
Address: 105 RANGELINE WOODS COVE  
City-St-Zip: LONGWOOD, FL 32750

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:** DINESH VARDHAN

VP

04/26/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date