## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000002647

FILED Mar 31, 2010 Secretary of State

Entity Name: ARBOR RIDGE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

225 S. WESTMONTE DR 225 S WESTMONTE DR

#3310 STE #3310

ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32714 US

Current Mailing Address: New Mailing Address:

PO BOX 162147 PO BOX 162147

ALTAMONTE SPRINGS, FL 327162147 ALTAMONTE SPRINGS, FL 32716 US

FEI Number: 59-3644398 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PFAUSER, MARGO A VISTA COMMUNITY ASSOCIATION MANAGEMENT, IN 225 SOUTH WESTMONTE DR., STE. 3310 VISTA COMMUNITY ASSOCIATION MANAGEMENT, IN 225 S WESTMONTE DR

ALTAMONTE SPRINGS, FL 32714 US #3310
ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL 32714 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: ELLEN R WOMACK 03/31/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: BROADBENT, GARY
Address: 3132 LINDERA DR
City-St-Zip: DELTONA, FL 32725

Title: \

Name: KIEPERT, MICHAEL
Address: 3254 WILD PEPPER CT
City-St-Zip: DELTONA, FL 32725

Title: ST

Name: DONAHUE, JUDITH Address: 3146 RED BERRY CT City-St-Zip: DELTONA, FL 32725

I hereby 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 all other like empowered.

SIGNATURE: GARY BROADBENT P 03/31/2010