

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003124

FILED
Mar 15, 2006
Secretary of State

Entity Name: NORTHRIDGE GARDENS OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

1958 WOODCREST RIDGE
FT. WALTON BEACH, FL 32597

New Principal Place of Business:

Current Mailing Address:

1958 WOODCREST RIDGE
FT. WALTON BEACH, FL 32597

New Mailing Address:

FEI Number: 59-3640072 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UMBERGER, LYNDA
1958 WOODCREST RIDGE
FT. WALTON BEACH, FL 32547 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: PD () Delete
Name: UMBERGER, LYNDA
Address: 1958 WOODCREST RIDGE
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: TD () Delete
Name: NANLEY, NANCY
Address: 1954 WOODCREST RIDGE
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: SD () Delete
Name: WYNN, WANDA
Address: 1962 WOODCREST RIDGE
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: UMBERGER, LYNDA
Address: 1958 WOODCREST RIDGE
City-St-Zip: FT. WALTON BEACH, FL 32547

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

Title: PD (X) Change () Addition
Name: MCCULLEN, BEVERLY
Address: 1952 WOODCREST RIDGE
City-St-Zip: FORT WALTON BEACH, FL 32547

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: LYNDA UMBERGER

SD

03/15/2006

Electronic Signature of Signing Officer or Director

_____ Date