

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004242

FILED  
Apr 28, 2011  
Secretary of State

**Entity Name:** CEDAR RIDGE AT AUTUMN WOODS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O COMPASS GROUP  
3701 TAMIAMI TRAIL N STE 101  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O COMPASS GROUP  
3701 TAMIAMI TRAIL N  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 59-3656934      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

QUARLES & BRADY  
1395 PANTHER LANE  
STE 300  
NAPLES, FL 34109 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  
Name: STATON, LA  
Address: 7127 BLUE JUNIPER COURT. #202  
City-St-Zip: NAPLES, FL 34109

Title: T  
Name: RICHARDS, ROSE GRADY  
Address: 7114 WILD FOREST COURT 102  
City-St-Zip: NAPLES, FL 34109

Title: VP  
Name: MANDATO, AUBREY  
Address: 7114 WILD FOREST COURT 102  
City-St-Zip: NAPLES, FL 34109

Title: DIR  
Name: MANGOS, BETTY  
Address: 7126 BLUE JUNIPER COURT 102  
City-St-Zip: NAPLES, FL 34109

Title: S  
Name: BARRASSO, GAIL  
Address: 7119 WILD FOREST COURT 102  
City-St-Zip: NAPLES, FL 34109

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: MARK HUMPHREY

CFO

04/28/2011

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

\_\_\_\_\_  
Date