

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01838

FILED  
Jan 15, 2008  
Secretary of State

**Entity Name:** RIDGE MANOR AREA CRIME WATCH, INC.

**Current Principal Place of Business:**

34558 ORCHID PARKWAY  
RIDGE MANOR, FL 33523

**New Principal Place of Business:**

**Current Mailing Address:**

34558 ORCHID PARKWAY  
RIDGE MANOR, FL 33523 US

**New Mailing Address:**

**FEI Number:** 59-2163401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEFILIPPO, CAROL  
34558 ORCHID PARKWAY  
RIDGE MANOR, FL 33523 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: DEFILIPPO, ROBERT W  
Address: 34558 ORCHID PKWY  
City-St-Zip: RIDGE MANOR, FL 33523

Title: VPD ( ) Delete  
Name: MILLER, WILLIAM,  
Address: 5067 LAKEWOOD DR.  
City-St-Zip: RIDGE MANOR, FL 33523

Title: SD ( ) Delete  
Name: MILLER, PAULINE,  
Address: 5067 LAKEWOOD DR.  
City-St-Zip: RIDGE MANOR, FL 33523

Title: TD ( ) Delete  
Name: DEFILIPPO, CAROL  
Address: 34558 ORCHID PKWY  
City-St-Zip: RIDGE MANOR, FL 33523

Title: D ( ) Delete  
Name: RITZ, RON & JOANNE  
Address: 34770 ORCHID PKWY  
City-St-Zip: RIDGE MANOR, FL 33523

Title: D ( ) Delete  
Name: DEAL, LAWRENCE  
Address: 34640 ORCHID PKWY  
City-St-Zip: RIDGE MANOR, FL 33523

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

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

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

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

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

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

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: CAROL DEFILIPPO

TD

01/15/2008

Electronic Signature of Signing Officer or Director

Date