

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01838

FILED  
Feb 12, 2012  
Secretary of State

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

**Current Principal Place of Business:**

SR50 EAST  
RIDGE MANOR, FL 33523

**New Principal Place of Business:**

34243 CORTEZ BLVD  
RIDGE MANOR, FL 33523

**Current Mailing Address:**

P. O. BOX 34240  
RIDGE MANOR, FL 33523 US

**New Mailing Address:**

34243 CORTEZ BLVD  
RIDGE MANOR, FL 33523 US

**FEI Number:** 59-2163401

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MULLER, MEREDITH M  
34448 CEDARFIELD DR.  
RIDGE MANOR, FL 33523 US

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

DEFILIPPO, CAROL  
34558 ORCHID PKWY  
RIDGE MANOR, FL 33523 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: CAROL DEFILIPPO

02/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HENDERSON, NED  
Address: 5164 LAKEWOOD DR.  
City-St-Zip: RIDGE MANOR, FL 33523 US

Title: VP  
Name: DEFILIPPO, ROBERT W  
Address: 34558 ORCHID PKWY  
City-St-Zip: RIDGE MANOR, FL 33523

Title: SD  
Name: NEUBERGER, BARBARA  
Address: 5262 LITTLE GREEN LANE  
City-St-Zip: RIDGE MANOR, FL 33523

Title: TD  
Name: MULLER, MEREDITH M  
Address: 34448 CEDARFIELD DR.  
City-St-Zip: RIDGE MANOR, FL 33523

Title: D  
Name: DAVIGNON, RONNIE  
Address: 32374 MARCHMONT CIRCLE  
City-St-Zip: RIDGE MANOR, FL 33523

Title: D  
Name: NETTLE, ALFRED  
Address: 35093 WHISPERING OAKS BLVD.  
City-St-Zip: RIDGE MANOR, FL 33523

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: ROBERT W DEFILIPPO

V P

02/12/2012

Electronic Signature of Signing Officer or Director

Date