2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000543

Apr 22, 2004 Secretary of State

Entity Name: RIDGE POINTE COVE HOMEOWNERS ASSOCIATION, INC.

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

706 TURNBULL AVE., SUITE 303 1008 RIDGE POINTE COVE LONGWOOD, FL 32750 U

ALTAMONTE SPRINGS, FL 32701

Current Mailing Address: New Mailing Address:

706 TURNBULL AVE., SUITE 303 1008 RIDGE POINTE COVE LONGWOOD, FL 32750 US

ALTAMONTE SPRINGS, FL 32701

FEI Number: 06-1645994 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:

GRAHAM, JESSE E SR.

369 N. NEW YORK AVE., 3RD FLOOR
WINTER PARK, FL 32789 US

THORNE, CHRISTOPHER E
1008 RIDGE POINTE COVE
LONGWOOD, FL 32750 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: CHRISTOPHER E. THORNE 04/22/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CH

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PRES (X) Change () Addition Name: GOLDBERG, ALLEN N Name: THORNE, CHRISTOPHER E Address: 706 TURNBULL AVE. SUITE 102 Address: 1008 RIDGE POINTE COVE City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: LONGWOOD, FL 32750 US

Title: VSTD () Delete Title: VP (X) Change () Addition Name: COLE, WILLIAM W JR. Name: DIMPERIO, MICHAEL

Address: 706 TURNBULL AVE. SUITE 102 Address: 1012 RIDGE POINTE COVE City-St-Zip: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: LONGWOOD, FL 32750 US

Title: D () Delete Title: TRES (X) Change () Addition

 Name:
 SCHAUB, FREDRIC G
 Name:
 HUGHES, LORRIE

 Address:
 4760 N.PALMETTO AVE.
 Address:
 1036 RIDGE POINTE COVE

 City-St-Zip:
 WINTER PARK, FL 32792
 City-St-Zip:
 LONGWOOD, FL 32750 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTOPHER E. THORNE PRES 04/22/2004