## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000001181

FILED Mar 10, 2010 Secretary of State

Entity Name: FAWN RIDGE HOMEOWNERS ASSOCIATION, INC.

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

2869 STAGS LEAP DRIVE ORANGE CITY, FL 32763 US

**Current Mailing Address: New Mailing Address:** 

860 NORTH S.R 434 **SUITE 1009** 

ALTAMONTE SPRINGS, FL 32714

FEI Number: 04-3656469 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:

CAMPBELL, MARILYN 860 NORTH S.R. 434 **SUITE 1009** 

ALTAMONTE SPRINGS, FL 32714 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

DAWSON, CHERYL VP Name: Address: 2883 STAGS LEAP DR. City-St-Zip: ORANGE CITY, FL 32763 US

Title:

Name: STURDEVANT, CIARA S Address: 2854 STAGS LEAP DR. City-St-Zip: ORANGE CITY, FL 32763 US

Title:

ARIMENTO, KENNETH D Name: Address: 2869 STAGS LEAP DR. City-St-Zip: ORANGE CITY, FL 32763 US

Title:

Name: TROXLER, ERIC T Address: 2885 STAGS LEAP DR. City-St-Zip: ORANGE CITY, FL 32763 US

Title:

FOSTER, DAWN P Name: 2875 STAGS LEAP DR. Address: ORANGE CITY, FL 32763 US City-St-Zip:

Title:

DUTTON, KARIN MGR Name:

Address: 860 NORTH S.R. 434, SUITE 1009 ORANGE CITY, FL 32763 US City-St-Zip:

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: KARIN DUTTON **MGR** 03/10/2010