


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 21, 2005 08:00 AM
Secretary of State

DOCUMENT # N02000008617	
1. Entity Name RIDGEWOOD NEIGHBORHOOD ASSOCIATION, INC.	

Principal Place of Business 418 NW 4TH AVENUE BOYNTON BEACH, FL 33435	Mailing Address 418 NW 4TH AVENUE BOYNTON BEACH, FL 33435
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DO NOT WRITE IN THIS SPACE



07062005 No Chg-NP CR2E037 (10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HAMMOND, ERICA
418 NW 4TH AVENUE
BOYNTON BEACH, FL 33435

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) **DATE** _____

Filing Fee is \$61.25 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HAMMOND, ERICA 418 NW 4TH AVENUE BOYNTON BEACH, FL 33435
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP CLARK, EVELYN 906 NW 4TH STREET BOYNTON BEACH, FL 33435
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S JONES, MYRA 311 NW 4TH AVE BOYNTON BEACH, FL 33435
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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07/21/05-80005-001 306.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: E Hammond **7/11/05** **Home 561-738-5468** **Cell 561-396-5087**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR