2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 18, 2007
Secretary of State

DOCUMENT# N03000004341

Entity Name: HIGH RIDGE NEIGHBORHOOD IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

5611 N W 24TH AVENUE
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

5611 N W 24TH AVENUE
MIAMI, FL 33142

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

IVORY, NIKITA
5400 N W 22ND AVENUE
SUITE 701
MIAMI, FL 33142 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:	SLATER, MARY	
Address:	5611 N W 24TH AVENUE	
City-St-Zip:	MIAMI, FL 33142	
Title:	VD	( ) Delete
Name:	GRODSON, TOBY	
Address:	2375 NW 56TH STREET	
City-St-Zip:	MIAMI, FL 33142	
Title:	SD	( ) Delete
Name:	CARTER, IDELLA	
Address:	2407 N W 56TH STREET	
City-St-Zip:	MIAMI, FL 33142	
Title:	TD	( ) Delete
Name:	ANDERSON, ALBERTA	
Address:	5573 N W 24TH AVENUE	
City-St-Zip:	MIAMI, FL 33142	

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:	

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: MARY SLATER PD 07/18/2007
Electronic Signature of Signing Officer or Director — Date