## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000004563

**FILED** May 01, 2006 Secretary of State

Entity Name: CHARLESTON RIDGE CONDOMINIUMS ASSOCIATION, INC.

Current Princip	oal Place of Business:	New Princi	pal Place of Business:

1320 HENDRIX RD TALLAHASSEE, FL 32301

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

431 WAVERLY RD TALLAHASSEE, FL 32312

FEI Number: 20-1298450 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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: Name and Address of New Registered Agent:

ISAACS, DON LEE ISAACS, DAN LEE 431 WAVERLY RD 431 WAVERLY RD

TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312 US 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: DAN LEE ISAACS 05/01/2006

> Electronic Signature of Registered Agent Date

> > Name:

## **OFFICERS AND DIRECTORS:**

Name:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP (X) Change ( ) Addition () Delete

DEAN, CARLTON FALL, MIREILLE Address: 1882 CAPITAL CIR NE STE 106 Address: 1320-102 HENDRIX ROAD TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32301

City-St-Zip: City-St-Zip: Title: Title:

() Delete (X) Change ( ) Addition Name: BENNETT, JIMMY Name: LIEBLICK, WILLIAM Address: 3402 APALACHEE PKWY Address: 1320-201 HENDRIX ROAD City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301

Title: DV () Delete Title: (X) Change ( ) Addition

DICKSON, JOHN FALL, MEREILLE Name: Name: 1320 HENDRIX RD 1320-708 HENDRIX RD Address: Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301

Title: () Delete Title: DS ( ) Change (X) Addition

WOZNIAK, CARRIE ANN Name: Name: 1320-604 HENDRIX RD Address: Address: TALLAHASSEE, FL 32301 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN DICKSON Т 05/01/2006