

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004563

FILED  
Apr 30, 2007  
Secretary of State

**Entity Name:** CHARLESTON RIDGE CONDOMINIUMS ASSOCIATION, INC.

**Current Principal Place of Business:**

1320 HENDRIX RD  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

431 WAVERLY RD  
TALLAHASSEE, FL 32312

**New Mailing Address:**

**FEI Number:** 20-1298450

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ISAACS, DAN LEE  
431 WAVERLY RD  
TALLAHASSEE, FL 32312 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: DP ( ) Delete  
Name: FALL, MIREILLE  
Address: 1320-102 HENDRIX ROAD  
City-St-Zip: TALLAHASSEE, FL 32301

Title: DVP ( ) Delete  
Name: LIEBLICK, WILLIAM  
Address: 1320-201 HENDRIX ROAD  
City-St-Zip: TALLAHASSEE, FL 32301

Title: DT ( ) Delete  
Name: DICKSON, JOHN  
Address: 1320-708 HENDRIX RD  
City-St-Zip: TALLAHASSEE, FL 32301

Title: DS ( ) Delete  
Name: WOZNAK, CARRIE ANN  
Address: 1320-604 HENDRIX RD  
City-St-Zip: TALLAHASSEE, FL 32301

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: JOHNSTON, JASON  
Address: 1320-904 HENDRIX ROAD  
City-St-Zip: TALLAHASSEE, FL 32301

Title: DP (X) Change ( ) Addition  
Name: LIEBLICK, WILLIAM  
Address: 1320-201 HENDRIX ROAD  
City-St-Zip: TALLAHASSEE, FL 32301

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BLATHERS, DERRICK  
Address: 1320-704 HENDRIX RD  
City-St-Zip: TALLAHASSEE, FL 32301

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: WILLIAM LIEBLICK

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date