2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 25, 2008 8:00 am Secretary of State

02-25-2008 90035 004 ****61.25

DOCUMEN	VT #	N0400	0000	0135
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1. Entity Name REGAL RIDGE HOMEOWNERS ASSOCIATION, INC

REGAL F	RIDGE HOMEOWNI	ERS ASSOCIA	TION, INC.							
Principal Plac 11448 PATI CLERMONT,		P.O.	g Address BOX 120592 RMONT, FL 34712				- 1 000 -	11 29 110 33 111 33 11	n N eta Me n e	111 9) Bi (12 11
2. Principal I	Place of Business - No P.O.	Box# 3. Mai	ling Address							
Suite, Apt	Suite, Apt. #, etc. Suite, Apt. #, etc.				02202008 _C	thg-NP	CR2E037	(12/06)		
City & Sta	te	Ci	ty & State			4. FEI Number 51-04644	10			oplied For ot Applicab
Zip	Country	Zij	o T	Country		5. Certificate of S	tatus Desired		8.75 Add ee Require	
	6. Name and Address	of Current Registere	ed Agent			7. Name and Add	dress of New R	egistered A	jent	
	*******			Na	me					
	TEPHEN H ESQ SEWATER DR D			Stre	eet Address ((P.O. Box Number is	Not Acceptable	*)		
ORLANDO	D, FL 32804									
				City FL Zip Code						
the obliga	e named entity submits this s tions of registered agent. Signature, typed or printed name of n					red agent, or both, in	n the State of Flo	DATE	miliar with,	and accep
	Filing Fee is \$61.25 Due by May 1, 2008 9. Election Campaig Trust Fund Contrib			ing	\$5.00 May Be Added to Fees Make check payable to Florida Department of State					
10.	OFFICE	RS AND DIRECTORS		11.		ADDITIONS/CHANG	ES TO OFFICE	RS AND DIRE	CTORS IN	10
TITLE	PD	,	☐ Delete	TITLE			.20 10 01.102		☐ Change	Additio
NAME	ALLEN, ALICIA			NAME	- 1					
STREET ADDRESS	11438 PATRICO LOOF	•		STREET ADDR	ecc					
CITY-ST-ZIP	CLERMONT, FL 3471	1								
IIITE	VD			CITY-ST-ZIP						
NAME			Malan				_			- Addition
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	11449 PATRICO LOOF			TITLE NAME STREET ADDR	RESS					
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Day 60, 00, 5

CITY-ST-ZIP

^{12.} If hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 i changed, or on an address, with all other like empowered.