## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000004005

FILED Apr 14, 2008 Secretary of State

Entity Name: LONG LAKE RIDGE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:  4888 LONG LAKE RIDGE DR  CHIPLEY, FL 32428  Current Mailing Address:			New Princ	New Principal Place of Business:  New Mailing Address:	
			New Mailir		
	G LAKE RIDG FL 32428	BE DR			
FEI Number	: 51-0507592	FEI Number Applied For()	FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )	
Name and	d Address of	Current Registered Agent:	Name and	Address of New Registered Agent:	
CHIPLEY,	G LAKE RIDO FL 32428	US	ournose of changing it	s registered office or registered agent, or both,	
	e of Florida.	submits this statement for the	purpose of changing it	s registered office of registered agent, or both,	
SIGNATU	RE:				
	Electro	onic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	POWELL, DA	AKE RIDGE DR	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPD ( CRITTENDON P.O. BOX 810 SOUTHPORT	03	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD ( FAUCHEUX, 1 1819 MOLITO PANAMA CITY	PR AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD ( ZIEMBA, ALLI 105 OAKWOO PANAMA CITY	DD DR	Title: Name: Address: City-St-Zip:	TD (X) Change ( ) Addition ZIEMBA, ALLAN 9025 WOODRUN RD PENSACOLA, FL 32514	
Title: Name: Address: City-St-Zip:	D ( KINARD, LEE 303 HARVARI LYNN HAVEN	D BLVD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: ALLAN ZIEMBA TD 04/14/2008