2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04000004263

1. Entity Name

SADDLE RIDGE HOMEOWNERS ASSOCATION, INC.



FILED Jan 31, 2006 08:00 AM Secretary of State

Principal Place of Business

30B E. LEMON STREET

SUITE 107 LAKELAND, FL 33801 __ Mailing Address

POST OFFICE BOX 617 KATHLEEN, FL 33849



01222006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 34-2037323

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SUTTON, CARLOS K JR 308 E. LEMON STREET SUITE 107 LAKELAND, FL 33801

CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pations of registered agent.	urpose of changing its registere	d office or i	registered agent, or bo	oth, in the State of Florida. I am familiar with, and acc
SIGNATURE.	Signature, typed or printed name of registered egent and title it	ennicable fNOTE-Banistared	Aneri signatur	e required when reinstalling)	DATE
	ordinana, tahon or human ana on rahington affaut que tue in	applicatio (10 in Ingistrou	- Name and states		
	Filling Fee is \$61.25 Due by May 1, 2006	 Election Campaign Finance Trust Fund Contribution. 	eing 🔲	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			I		<u> </u>
TRILE NAME STREET ADDRESS CITY-ST-TP	PSD SUTTON, CARLOS K 308 E. LEMON STREET SUITE 107 LAKELAND, FL 33801				U00000410023 02/09/06-80019-018 70.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD SUTTON, MICHAEL A 308 E. LEMON STREET SUITE 107 LAKELAND, FL 33801		: : :		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUTTON, ROBIN 308 E. LEMON STREET SUITE 197 LAKELAND, FL 33801	·		DO NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

12. I 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 supplemental report is true and accurate and that my signature shell have the same legal effect as if made under eath; 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WHAT SUPPLY SUPPL