

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04446

FILED
Apr 25, 2008
Secretary of State

Entity Name: ROCKRIDGE FARMETTES PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 59-2880643

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES M JR
2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044 US

Name and Address of New Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 327795044 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: JAMES W HART JR

04/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FYFE, GRACE
Address: 1825 RANCHLAND DR
City-St-Zip: LAKELAND, FL 33809

Title: VP (X) Delete
Name: COCHRAN, SARAH
Address: 1725 RANCHLAND DR
City-St-Zip: LAKELAND, FL 33809

Title: T (X) Delete
Name: LETZINGER, PATTY
Address: 1955 RANCHLAND DR
City-St-Zip: LAKELAND, FL 33809

Title: D (X) Delete
Name: SHIVER, DEBBIE
Address: 2014 RANCHLAND ACRER RD.
City-St-Zip: LAKELAND, FL 33809

Title: D (X) Delete
Name: LITHGOW, ELISCANN
Address: 2026 RANCHLAND DR
City-St-Zip: LAKELAND, FL 33809

Title: S (X) Delete
Name: ROBERTS, ANDREA
Address: 12329 COUNTRY SIDE DR.
City-St-Zip: LAKELAND, FL 33809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: REC (X) Change () Addition
Name: CRAWFORD, TERRENCE P
Address: 2180 WEST SR 434 SUITE 5000
City-St-Zip: LONGWOOD, FL 32779

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

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

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

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

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

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: TERRENCE P CRAWFORD

REC

04/25/2008

Electronic Signature of Signing Officer or Director

Date