2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004164

FILED Apr 20, 2006 Secretary of State

Entity Name: SUGARFOOT OAKS/CEDAR RIDGE PRESERVATION AND ENHANCEMENT DISTRICT, INC.

Current Principal Place of Business: New Principal Place of Business:

PO BOX 90125

GAINESVILLE, FL 32607

Current Mailing Address: New Mailing Address:

PO BOX 90125

GAINESVILLE, FL 32607

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

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

CLARK, CHAUNCEY 1320 SW 61 TERRACE GAINESVILLE, FL 32607 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PT
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 BENNETT, GORDON
 Name:
 CANTON, JOAN

 Address:
 3224 W UNIVERSITY PMB 239
 Address:
 6125 SW 11TH PLACE

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:
 GAINESVILLE, FL 32607

Title: VPT () Delete Title: V (X) Change () Addition

 Name:
 MCBROOM, SADIE
 Name:
 MCBROOM, SADIE

 Address:
 PO BOX 14021
 Address:
 PO BOX 14021

 City-St-Zip:
 GAINESVILLE, FL
 City-St-Zip:
 GAINESVILLE, FL

Title: ST () Delete Title: S (X) Change () Addition Name: ADAMS, CAROLYN Name: ADAMS, CAROLYN

Address: PO BOX 14272 Address: PO BOX 14272

City-St-Zip: GAINESVILLE, FL 32617 City-St-Zip: GAINESVILLE, FL 32617

Title: TT () Delete Title: T (X) Change () Addition Name: CLARK, CHAUNCEY Name: CLARK, CHAUNCEY

 Address:
 1320 SW 61 TERRACE
 Address:
 1320 SW 61 TERRACE

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:
 GAINESVILLE, FL 32607

Title: D () Delete Title: D (X) Change () Addition

 Name:
 CANTON, JOAN
 Name:
 CANTRELL, CYNTHIA

 Address:
 6125 SW 11 PLACE
 Address:
 1100 SW 62ND TERR. APT. D

 City-St-Zip:
 GAINESVILLE, FL 32607
 City-St-Zip:
 GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the 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: JOAN CANTON P 04/20/2006