

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003091

FILED
Feb 16, 2009
Secretary of State

Entity Name: FOREST RIDGE/HENDERSON HEIGHTS NEIGHBORHOOD ASSOCIATION INC.

Current Principal Place of Business:

C/O 1935 N.W. 22ND ST.
GAINESVILLE, FL 326053981

New Principal Place of Business:

Current Mailing Address:

C/O 1935 N.W. 22ND ST.
GAINESVILLE, FL 326053981

New Mailing Address:

FEI Number: 65-1294385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WEIDLER, PHILLIP
2025 NW 20TH LANE
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

MARSHALL, MELODY J
1935 NW 22ND STREET
GAINESVILLE, FL 32605 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: MELODY J. MARSAHLL

02/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MELODY, MARSHALL
Address: 1935 NW 22ND ST
City-St-Zip: GAINESVILLE, FL 32605

Title: V () Delete
Name: DEWITT, MONICA
Address: 2012 NW 21ST ST
City-St-Zip: GAINESVILLE, FL 32605

Title: T () Delete
Name: WEIDLER, PHILLIP
Address: 2025 NW 20TH LANE
City-St-Zip: GAINESVILLE, FL 32605

Title: S () Delete
Name: CASAGRANDE, JUANITA
Address: 1911 NW 22ND DR
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: MICKLEY, DALE
Address: 2229 NW 17TH AVENUE
City-St-Zip: GAINESVILLE, FL 32605

Title: T (X) Change () Addition
Name: LAMBERT, WARD
Address: 2239 NW 21ST AVENUE
City-St-Zip: GAINESVILLE, FL 32605

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: MELODY J. MARSAHLL

P

02/16/2009

Electronic Signature of Signing Officer or Director

Date