
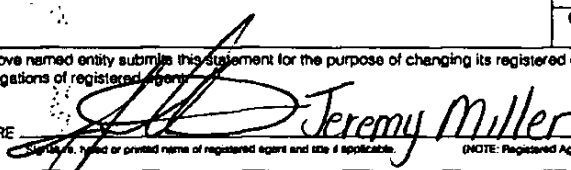
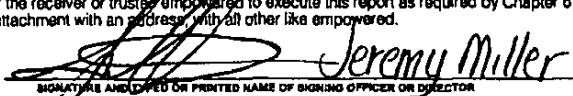


FILED  
May 10, 2007 8:00 am  
Secretary of State

04-23-2007 90281 014 \*\*\*\*70.00

2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT

<b>DOCUMENT # N06000004690</b>			
1. Entity Name PENDLETON RIDGE HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 255 N0TH LAKE AVENUE LAKE BUTLER, FL 32054 US		Mailing Address P.O. BOX 238 LAKE BUTLER, FL 32054 US	
2. Principal Place of Business - No P.O. Box # 12469 West SR100		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Lake Butler		City & State	
Zip 32054	Country US	Zip	Country
4. FEI Number		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		01042007 Chg-NP CR2E037 (12/06)	
6. Name and Address of Current Registered Agent MILLER, JEREMY L 255 NORTH LAKE AVENUE LAKE BUTLER, FL 32054		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 12469 West SR100 City Lake Butler FL Zip Code 32054	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Jeremy Miller DATE 4/19/07 (NOTE: Registered Agent signature required when reappointing)			
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Jeremy Miller Po Box 233 Lake Butler FL 32054 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.			
SIGNATURE:  Jeremy Miller		Date 4/17/07 386-496-3509	