## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000009036

FILED Jun 09, 2008 Secretary of State

Entity Name: THE RIDGE AT SWAN LAKE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal PI	New Principal Place of Business:	
	NE STREET			
JITE 200 SSIMME	E, FL 32744			
		Navy Mailing Ada	J.,	
urrent ivi	ailing Address:	New Mailing Add	iress:	
33 E. VII JITE 200	NE STREET			
	E, FL 32744			
I Number:		Number Not Applicable ()	Certificate of Status Desired ( )	
	ce with s. 607.193(2)(b), F.S., the corporation did not recein Address of Current Registered Agent:	•	ss of New Registered Agent:	
33 E. VII	NE STREET			
33 E. VII JITE 200 SSIMME	NE STREET E, FL 32744 US			
33 E. VII JITE 200 SSIMME ne above the State	NE STREET  E, FL 32744 US  named entity submits this statement for the purpose of Florida.	se of changing its regis	stered office or registered agent, or both,	
33 E. VII JITE 200 SSIMME ie above the State	NE STREET  E, FL 32744 US  named entity submits this statement for the purpose of Florida.  RE:	se of changing its regis		
33 E. VII JITE 200 SSIMME ie above the State	NE STREET  E, FL 32744 US  named entity submits this statement for the purpose of Florida.	se of changing its regis	stered office or registered agent, or both,  Date	
33 E. VII JITE 200 SSIMME ne above the State GNATUF	NE STREET  E, FL 32744 US  named entity submits this statement for the purpose of Florida.  RE:			
33 E. VII JITE 200 SSIMME Le above the State GNATUF	NE STREET  E, FL 32744 US  named entity submits this statement for the purpose of Florida.  RE:  Electronic Signature of Registered Agent  S AND DIRECTORS:  PD () Delete		Date	
33 E. VII JITE 200 SSIMME e above the State GNATUF FFICERS e: me:	NE STREET  E, FL 32744 US  named entity submits this statement for the purpose of Florida.  RE:  Electronic Signature of Registered Agent  S AND DIRECTORS:  PD () Delete SANCHEZ, DOMINGO	ADDITIONS/CHA Title: Name:	Date ANGES TO OFFICERS AND DIRECTOR	
33 E. VII JITE 200 SSIMME e above the State GNATUF FFICERS e: me: dress:	NE STREET  E, FL 32744 US  named entity submits this statement for the purpose of Florida.  RE:  Electronic Signature of Registered Agent  S AND DIRECTORS:  PD () Delete SANCHEZ, DOMING0 1633 E. VINE STREET, SUITE 200	ADDITIONS/CHA Title: Name: Address:	Date ANGES TO OFFICERS AND DIRECTOR	
33 E. VII  IITE 200  SSIMME  e above  the State  GNATUF  FFICERS  e:  me: dress:	NE STREET  E, FL 32744 US  named entity submits this statement for the purpose of Florida.  RE:  Electronic Signature of Registered Agent  S AND DIRECTORS:  PD () Delete SANCHEZ, DOMINGO	ADDITIONS/CHA Title: Name:	Date ANGES TO OFFICERS AND DIRECTOR	
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33 E. VII IITE 200 SSIMME e above the State GNATUF FFICERS e: ne: tress: y-St-Zip: e: ne:	E, FL 32744 US  named entity submits this statement for the purpose of Florida.  RE:  Electronic Signature of Registered Agent  S AND DIRECTORS:  PD () Delete SANCHEZ, DOMINGO 1633 E. VINE STREET, SUITE 200 KISSIMMEE, FL 32744  VD () Delete FROELICH, SEAN	ADDITIONS/CHA  Title: Name: Address: City-St-Zip:  Title: Name:	Date  NGES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition	
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33 E. VII JITE 200 SSIMME The above The State GNATUF FFICERS The e: The company of the state The	E, FL 32744 US  named entity submits this statement for the purpose of Florida.  RE:  Electronic Signature of Registered Agent  S AND DIRECTORS:  PD () Delete SANCHEZ, DOMING0 1633 E. VINE STREET, SUITE 200 KISSIMMEE, FL 32744  VD () Delete FROELICH, SEAN 1633 E. VINE STREET, SUITE 200 KISSIMMEE, FL 32744  STD () Delete BELEW, BARBARA	ADDITIONS/CHA  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name:	Date  NGES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition  ( ) Change ( ) Addition	
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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: DOMINGO SANCHEZ PD 06/09/2008