2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09092

FILED Apr 27, 2007 Secretary of State

Entity Name: SILVER RIDGE HOMEOWNERS' ASSOCIATION, INC

Entity Nai	me: SILVER F	RIDGE HOMEOWNERS' ASSC	OCIATION, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
ASSOCIATION PROPERTY MGT 4020 BURSED PLACE OVIEDO, FL 32765 US			TOP NOTCH MANAG 110 N. ORLANDO AVI MAITLAND, FL 32751	E. STE6	
Current M	lailing Addres	s:	New Mailing Address	New Mailing Address:	
PMB 345 4250 ALAF OVIEDO, F	FAYA TRL FL 32765 U	S	110 N. ORLANDO AVI 6 MAITLAND, FL 32751		
FEI Number:	: 59-2563243	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
BURNSIDE, LILLY L ASSOCIATION CURTIS BURNSIDE PMB 345 4250 ALAFAYA TRL OVIEDO, FL 32765 US			6	110 N. ORLANDO AVE.	
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE: MARILYN	IVINCE		04/27/2007	
	Electror	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () GREENE, TON' 7505 BORDWII ORLANDO, FL	NE DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () SABADER, YVO 7631 COLEBRO ORLANDO, FL	DOK DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVP () LEWSI, FAY 2822 ST. CLAIF ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MOSLOW, LER 2665 STANLEY ORLANDO, FL	CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MARILYN VINCE CAM 04/27/2007