2007 NOT-FOR-PROFIT CORPORATION

May 14, 2007 8:00 am ANNUAL REPORT Secretary of State **DOCUMENT # N12073** 05-14-2007 90069 035 ****61.25 1. Entity Name ALLEN'S RIDGE HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address MILLION INTEGRITY ASSOC. MGT INTEGRITY ASSOC. MGT 701 ENTERPRISE RD E SUITE 704 701 ENTERPRISES RD E SUITE704 SAFETY HARBOR, FL 34695 SAFETY HARBOR, FL 34695 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number Applied For 59-2602680 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CIANFRONE, JOSEPH R 1964 BAYSHORE BLVD Street Address (P.O. Box Number is Not Acceptable) DUNEDIN, FL 34698 J. J. Aleks Zip Code 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** Signature, typed or printed name of registered agent and title il applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution Florida Department of State Due by May 1, 2007 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE Delete TITLE ☐ Addition FLAHERTY BRIAN NAME NAME 1522 SAND HOLLOW CT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL 34683 CITY-ST-ZIP SD TITLE ☐ Defete TITLE ☐ Change ■ Addition HEDGER, SANDRA NAME NAME 1524 POWDER RIDGE COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL 34683 CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition NAME SCHNEIDER, STANLEY NAME 119 ALLEN'S RIDGE DRIVE EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL 34683 CITY-ST-ZIP TITLE ☐ Delete ☐ Addition ☐ Change GREEN, STEVEN NAME STREET ADDRESS 1581 CUMBERLAND COURT EAST STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL 34683 CITY-ST-ZIP ☐ Delete TITLE ☐ Addition GIASOBONI, CHESTER NAME MALAF STREET ADDRESS 1557 CUMBERLAND COURT WEST STREET ADDRESS CITY-ST-ZIP PALM HARBOR, FL 34683 CITY-ST-ZIP

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.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TED NAME OF SIGNING OFFICER OR DIRECTOR

MENSPOREDRE, HACBUR, FL34683

Daytime Phone #

☐ Change

☐ Addition

FILED