

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14603

FILED
May 02, 2007
Secretary of State

Entity Name: CEDAR RIDGE ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

6818 CEDAR RIDGE DR
PENSACOLA, FL 32526 US

New Principal Place of Business:

Current Mailing Address:

6818 CEDAR RIDGE DR
PENSACOLA, FL 32526 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DRIVER, RICHARD
6818 CEDAR RIDGE DR
PENSACOLA, FL 32526 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DRIVER, RICHARD
Address: 6818 CEDAR RIDGE DR
City-St-Zip: PENSACOLA, FL 32526 US

Title: VD () Delete
Name: FRANGIONE, PETER
Address: 6819 CEDAR RIDGE DR
City-St-Zip: PENSACOLA, FL 32526

Title: SD () Delete
Name: FRANGIONE, EDIE
Address: 6819 CEDAR RIDGE DR
City-St-Zip: PENSACOLA, FL 32526

Title: TD () Delete
Name: PITTSBARGER, ROBIN
Address: 6835 CEDAR RIDGE DR
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: () Change () Addition
Name:
Address:
City-St-Zip: 26

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

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: RICHARD DRIVER

PD

05/02/2007

Electronic Signature of Signing Officer or Director

_____ Date