

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17959

FILED  
Feb 06, 2008  
Secretary of State

Entity Name: GLENRIDGE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

11902 RACE TRACK ROAD  
TAMPA, FL 33626

**New Principal Place of Business:**

**Current Mailing Address:**

11902 RACE TRACK ROAD  
TAMPA, FL 33626 US

**New Mailing Address:**

FEI Number: 59-2793582

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

THE PROPERTY GROUP OF CENTRAL FLORIDA  
11902 RACE TRACK ROAD  
TAMPA, FL 33626 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: DP ( ) Delete  
Name: LOGIER, RICK  
Address: 3277 GLENRIDGE CT  
City-St-Zip: PALM HARBOR, FL 34685

Title: DT ( ) Delete  
Name: HARRISON, JIM  
Address: 3245 GLENRIDGE CT  
City-St-Zip: PALM HARBOR, FL 3465

Title: DS ( ) Delete  
Name: WATERSON, LISA  
Address: 3261 GLENRIDGE CT  
City-St-Zip: PALM HARBOR, FL 34685

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DT (X) Change ( ) Addition  
Name: BACHMAN, SUSAN  
Address: 3220 GLENRIDGE CT  
City-St-Zip: PALM HARBOR, FL 34685

Title: DP (X) Change ( ) Addition  
Name: HARRISON, JIM  
Address: 3245 GLENRIDGE CT  
City-St-Zip: PALM HARBOR, FL 3465

Title: DS (X) Change ( ) Addition  
Name: GRAHAM, PAULA  
Address: 3284 GLENRIDGE CT  
City-St-Zip: PALM HARBOR, FL 34685

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: JIM HARRISON

DP

02/06/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date