2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2012
Secretary of State

DOCUMENT# N21903

Entity Name: ARBOR RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

493 ARBOR RIDGE LANE
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

P O BOX 5802
TITUSVILLE, FL 32780 US

New Mailing Address:

FEI Number: 59-2780079 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOCKS, ROBERT L PRES.
493 ARBOR RIDGE LANE
TITUSVILLE,, FL 32780 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: PRES
Name: SOCKS, ROBERT L
Address: 493 ARBOR RIDGE LANE
City-St-Zip: TITUSVILLE, FL 32780

Title: V P
Name: FIELDS, PAUL
Address: 493 L.M. DAVEY LANE
City-St-Zip: TITUSVILLE, FL 32780

Title: SEC
Name: KUNTZ, DONNA
Address: 521 ARBOR RIDGE LANE
City-St-Zip: TITUSVILLE, FL 32780

Title: T
Name: BLACKWELL, WILLIAM
Address: 524 ARBOR RIDGE LANE
City-St-Zip: TITUSVILLE, FL 32780

Title: BRD
Name: MOORE, JAMES W
Address: 505 ARBOR RIDGE LN.
City-St-Zip: TITUSVILLE, FL 32780

Title: BRD
Name: TURNER, RICHARD
Address: 518 ARBOR RIDGE LANE
City-St-Zip: TITUSVILLE, FL 32780

I hereby 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 all other like empowered.

SIGNATURE: ROBERT L. SOCKS PRES 01/10/2012

Electronic Signature of Signing Officer or Director — Date