

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25353

**FILED**  
**Feb 12, 2010**  
**Secretary of State**

**Entity Name:** RIDGEWOOD OAKS PROFESSIONAL CENTER ASSOICATION, INC.

**Current Principal Place of Business:**

912 S RIDGEWOOD AVE  
STE B  
DAYTONA BCH., FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

912 S RIDGEWOOD AVE  
STE B  
DAYTONA BCH., FL 32114

**New Mailing Address:**

**FEI Number:** 59-2925112

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, C. ROBERT  
912 S. RIDGEWOOD AVE., SUITE C  
DAYTONA BEACH, FL 32114 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: TD  
Name: BROWN, C. ROBERT  
Address: 6211 SANTA MONICA DR.  
City-St-Zip: PORT ORANGE, FL

Title: PD  
Name: DUNN, DAVE A.  
Address: 330 ZELDA BLVD.  
City-St-Zip: DAYTONA BEACH, FL

Title: VD  
Name: MACINTYRE III, RODERICK M  
Address: 100 PLEASANT VALLEY DR  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: SD  
Name: DUPONT, SCOTT  
Address: 912 S RIDGEWOOD AVE STE D  
City-St-Zip: DAYTONA BEACH, FL 32114

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: C. ROBERT BROWN

TD

02/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date