

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29223

FILED
Apr 09, 2009
Secretary of State

Entity Name: SPRING RIDGE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

9754 SPRING RIDGE CIR
ESTERO, FL 33928 US

New Principal Place of Business:

Current Mailing Address:

9754 SPRING RIDGE CIR
ESTERO, FL 33928 US

New Mailing Address:

FEI Number: 65-0110248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ST.JOHN, NICOLE
9754 SPRING RIDGE CIR
ESTERO, FL 33928 US

Name and Address of New Registered Agent:

GOLL, JOHN
9691 SPRING RIDGE CIR
ESTERO, FL 33928 US

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: JOHN GOLL

04/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ST.JOHN, JAMES
Address: 9754 SPRING RIDGE CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: VP () Delete
Name: LELIEVRE, MATTHEW
Address: 9659 SPRING RIDGE CIR
City-St-Zip: ESTERO, FL 33928

Title: ST () Delete
Name: ST.JOHN, NICOLE
Address: 9754 SPRING RIDGE CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: D () Delete
Name: FALLON, DAVE
Address: 9723 SPRING RIDGE CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: D () Delete
Name: ST JOHN, JAMES
Address: 9754 SPRING RIDGE CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: D () Delete
Name: BALLO, DON
Address: 9746 SPRING RIDGE CIR
City-St-Zip: ESTERO, FL 33928

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: LOSHER, BILL
Address: 9747 SPRING RIDGE CIR
City-St-Zip: ESTERO, FL 33928

Title: ST (X) Change () Addition
Name: GOLL, JOHN
Address: 9691 SPRING RIDGE CIR
City-St-Zip: ESTERO, FL 33928

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

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: JOHN GOLL

ST

04/09/2009

Electronic Signature of Signing Officer or Director

Date