

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29223

FILED  
Apr 15, 2011  
Secretary of State

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

**Current Principal Place of Business:**

9691 SPRING RIDGE CIR  
ESTERO, FL 33928 US

**New Principal Place of Business:**

**Current Mailing Address:**

9691 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:**

GOLL, JOHN  
9691 SPRING RIDGE CIR  
ESTERO, FL 33928 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: P  
Name: FALLON, DAVE  
Address: 9723 SPRING RIDGE CIRCLE  
City-St-Zip: ESTERO, FL 33928

Title: VP  
Name: LOSHER, BILL  
Address: 9747 SPRING RIDGE CIR  
City-St-Zip: ESTERO, FL 33928

Title: ST  
Name: GOLL, JOHN  
Address: 9691 SPRING RIDGE CIR  
City-St-Zip: ESTERO, FL 33928

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

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

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

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: JOHN GOLL

ST

04/15/2011

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

\_\_\_\_\_  
Date