

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31933

FILED
May 12, 2007
Secretary of State

Entity Name: INDIAN RIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

7725 SIMON RIDGE CT
KISSIMMEE, FL 34747 US

New Principal Place of Business:

Current Mailing Address:

7725 SIMON RIDGE CT
KISSIMMEE, FL 34747 US

New Mailing Address:

FEI Number: 59-2958932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ABRAHAMSEN, JOHN
7725 SIMON RIDGE CT
KISSIMMEE, FL 34747 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: VPD () Delete
Name: HASHER, WILLIAM
Address: 1060 JASON RIDGE CT
City-St-Zip: KISSIMMEE, FL 34747

Title: SEC () Delete
Name: D E P ALMA, PATRICIA
Address: 1110 ZACHARY RIDGE CT
City-St-Zip: KISSIMMEE, FL 34747

Title: D () Delete
Name: ACCETURO, VINCENT
Address: 1000 ABBY RIDGE CT
City-St-Zip: KISSIMMEE, FL

Title: D () Delete
Name: LINDBLAD, BOB
Address: 7752 INDIAN RIDGE TRAIL SOUTH
City-St-Zip: KISSIMMEE, FL

Title: P () Delete
Name: ABRAHAMSEN, JOHN
Address: 7725 SIMON RIDGE CT
City-St-Zip: KISSIMMEE, FL 34747

Title: D () Delete
Name: TONY, CARROLL
Address: 1070 JASON RIDGE CT
City-St-Zip: KISSIMMEE, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: ACCETURO, VINCENT
Address: 1100 ABBY RIDGE CT
City-St-Zip: KISSIMMEE, FL 34747

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

Title: D (X) Change () Addition
Name: HARTLOVE, JACKIE
Address: 7660 BENJI RIDGE TL
City-St-Zip: KISSIMMEE, FL 34747

Title: D (X) Change () Addition
Name: LINDBLAD, BOB
Address: 7752 INDIAN RIDGE TRAIL SOUTH
City-St-Zip: KISSIMMEE, FL 34747

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 ABRAHAMSEN

P

05/12/2007

Electronic Signature of Signing Officer or Director

Date