

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33247

FILED
Jul 21, 2008
Secretary of State

Entity Name: THE RAVINES PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

JIM SNYDER
3712 SWALLOWTAIL TRACE
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

JIM SNYDER
3712 SWALLOWTAIL TRACE
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 59-2995177 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

Name and Address of New Registered Agent:

SNYDER, JIM
3712 SWALLOWTAIL TRACE
TALLAHASSEE, FL 32309 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DIETZEN, LEONARD
Address: 2480 ELFINWING LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: BORDERS, GEORGE
Address: 3713 SWALLOWTAIL TRACE
City-St-Zip: TALLAHASSEE, FL 32309

Title: S () Delete
Name: CHRENO, LINDA
Address: 2461 ELFINWING LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: D () Delete
Name: LATOUR, CHARLES
Address: 3728 SWALLOWTAIL TRACE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: DEES, PATRICK
Address: 2481 PAPILLION WAY
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD () Delete
Name: SNYDER, JIM
Address: 3712 SWALLOWTAIL TRACE
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: JIM SNYDER

T/RA

07/21/2008

Electronic Signature of Signing Officer or Director

Date