

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35967

FILED
Mar 10, 2008
Secretary of State

Entity Name: POSTRIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

<UNUSED>
3953 POSTRIDGE TRAIL
MELBOURNE, FL 32934 US

New Principal Place of Business:

3953 POSTRIDGE TRAIL
MELBOURNE, FL 32934 US

Current Mailing Address:

3953 POSTRIDGE TRAIL
MELBOURNE, FL 32934 US

New Mailing Address:

FEI Number: 59-3011974 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JULIE SHIPLEY
3953 POSTRIDGE TRAIL
MELBOURNE, FL 32934 US

Name and Address of New Registered Agent:

SHIPLEY, JULIE N STD
3953 POSTRIDGE TRAIL
MELBOURNE, FL 32934 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: JULIE N SHIPLEY

03/10/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RICK, YOUNG
Address: 3923 POSTRIDGE TRAIL
City-St-Zip: MELBOURNE, FL 32934 US

Title: VD () Delete
Name: DANNY SICILIA,
Address: 3940 POSTRIDGE TR
City-St-Zip: MELBOURNE, FL 329348439 US

Title: STD () Delete
Name: SHIPLEY, JULIE
Address: 3953 POSTRIDGE TRAIL
City-St-Zip: MELBOURNE, FL 32934 US

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:

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: JULIE N SHIPLEY

STD

03/10/2008

Electronic Signature of Signing Officer or Director

Date