

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 02, 2011**  
**Secretary of State**

DOCUMENT# N35967

**Entity Name:** POSTRIDGE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**3940 POSTRIDGE TRAIL  
MELBOURNE, FL 32934 US**New Principal Place of Business:**3943 POSTRIDGE TRAIL  
MELBOURNE, FL 32934 US**Current Mailing Address:**3940 POSTRIDGE TRAIL  
MELBOURNE, FL 32934 US**New Mailing Address:**3943 POSTRIDGE TRAIL  
MELBOURNE, FL 32934 US**FEI Number:** 59-3011974**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**SHIPLEY, DANNY VD  
3940 POSTRIDGE TRAIL  
MELBOURNE, FL 32934 US**Name and Address of New Registered Agent:**DIXON, RUTH  
3943 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: RUTH E. DIXON

05/02/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JOHNSON, JIM  
Address: 3920 POSTRIDGE TRAIL  
City-St-Zip: MELBOURNE, FL 32934 US

Title: VD  
Name: DIXON,, JERRY D  
Address: 3943 POSTRIDGE TR  
City-St-Zip: MELBOURNE, FL 32934 US

Title: TRS  
Name: DIXON, RUTH E  
Address: 3943 POSTRIDGE TR  
City-St-Zip: MELBOURNE, FL 32934 US

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: RUTH E. DIXON

TRS

05/02/2011

Electronic Signature of Signing Officer or Director

Date