

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37128

FILED  
May 07, 2009  
Secretary of State

**Entity Name:** RIDGE POINTE HOMEOWNERS' ASSOCIATION OF POLK COUNTY, INC.

**Current Principal Place of Business:**

8038 RIDGE POINT DR W  
LAKELAND, FL 33810 US

**New Principal Place of Business:**

8030 RIDGE POINT DR W  
LAKELAND, FL 33810 US

**Current Mailing Address:**

8040 RIDGE PTE DR E.  
LAKELAND, FL 33810 US

**New Mailing Address:**

**FEI Number:** 59-3114401      **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:**

CROY, STANLEY  
8038 RIDGE POINT DR W  
LAKELAND, FL 33810 US

**Name and Address of New Registered Agent:**

BAUMAN, PATRICK  
8030 RIDGE POINT DR W  
LAKELAND, FL 33810 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: PATRICK BAUMAN

05/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CROY, STANLEY  
Address: 8038 RIDGE POINT DR W  
City-St-Zip: LAKELAND, FL 33810 US

Title: SD ( ) Delete  
Name: OSTOJIC, KAREN  
Address: 7938 RIDGE POINTE DR W  
City-St-Zip: LAKELAND, FL 33810

Title: TS ( ) Delete  
Name: HURD, ANTHONY  
Address: 8007 RIDGE POINTE DR W  
City-St-Zip: LAKELAND, FL 33810

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BAUMAN, PATRICK  
Address: 8030 RIDGE POINT DR W  
City-St-Zip: LAKELAND, FL 33810 US

Title: SD (X) Change ( ) Addition  
Name: MILLER, CONNIE  
Address: 7932 RIDGE POINTE DR W  
City-St-Zip: LAKELAND, FL 33810

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: ANTHONY HURD

TS

05/07/2009

Electronic Signature of Signing Officer or Director

Date