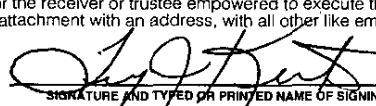


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90087 035 ****61.25

DOCUMENT # N40077 1. Entity Name HOLDEN RIDGE OWNERS ASSOCIATION, INC.					
Principal Place of Business % ATTWOOD & PHILLIPS 1350 ORANGE AVE., SUITE 100 WINTER PARK, FL 32789 US			Mailing Address % ATTWOOD & PHILLIPS 1350 ORANGE AVE., SUITE 100 WINTER PARK, FL 32789 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		03222004 Chg-NP CR2E037 (10/03)	
4. FEI Number 59-3111378				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PHILLIPS, ROGER V ATTWOOD-PHILLIPS INC. 1350 ORANGE AVENUE, SUITE 100 WINTER PARK, FL 32789				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.				FL Zip Code	
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOERNDT, DENNIS 4615 HOLDEN RIDGE AVE ORLANDO, FL 32839	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KEETON, TERRY 1109 JESSAMINE LAKE CT ORLANDO, FL 32839	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LACONIS, BRUCE 1237 TYLER LAKE CR. ORLANDO, FL 32839	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCOTT, MARY 4811 HIGH RIDGE CT ORLANDO, FL 32839	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP STOCK, RUDY 1117 JESSAMINE LAKE CT ORLANDO, FL 32839	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  3-28-04 407-221 4189 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					