

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008 8:00 am
Secretary of State

04-24-2008 90094 005 ****61.25

DOCUMENT # N40077 1. Entity Name HOLDEN RIDGE OWNERS ASSOCIATION, INC.					
Principal Place of Business C/O ATTWOOD-PHILLIPS INC 1350 ORANGE AVE STE 100 WINTER PARK, FL 32789-4932 US			Mailing Address C/O ATTWOOD-PHILLIPS INC 1350 ORANGE AVE STE 100 WINTER PARK, FL 32789-4932 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03312008 Chg-NP CR2E037 (12/06)	
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 GASPERONI & FLETCHER PA 156 S. CHARLES RICHARD BEALL BLVD. STE. 2 DEBARY, FL 32713			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing) DATE					
Filing Fee is \$61.25 Due by May 1, 2008		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	DS LAWRENTZ, BETTY 1125 JESSAMINE LAKE CT ORLANDO, FL 32839	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT 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	DP JOHNSON, EDDIE 1164 LAKE JESSAMINE CT ORLANDO, FL 32839	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SIEGEL, MARLENE 4623 HOLDEN RIDGE AVE ORLANDO, FL 32839	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Andree Fraser ☐ Change ☒ Addition 4825 High Ridge Ct ORLANDO FL 32839	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Elsie Michel ☐ Change ☒ Addition 1108 JESSAMINE LAKE CT ORLANDO FL 32839	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Betty Laurentz</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			4-16-08 407-857-1799 Date Daytime Phone #		