

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40148

FILED
Apr 29, 2009
Secretary of State

Entity Name: CASA BIANCA RIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

945 RIDGE RD
MONTICELLO, FL 32344

New Principal Place of Business:

Current Mailing Address:

945 RIDGE RD
1295 RIDGE ROAD
MONTICELLO, FL 32344

New Mailing Address:

FEI Number: 59-3038122 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SALANCY, FRED
945 RIDGE RD.
MONTICELLO, FL 32344 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEDFORD, DAN
Address: 751 RIDGE ROAD
City-St-Zip: MONTICELLO, FL 32344

Title: VD () Delete
Name: BERNETT, LINK
Address: 1276 RIDGE RD
City-St-Zip: MONTICELLO, FL 32344

Title: D () Delete
Name: WILBER, MEL
Address: 1021 RIDGE RD
City-St-Zip: MONTICELLO, FL 32344

Title: D () Delete
Name: MONGE, GEOFF
Address: 551 RIDGE ROAD
City-St-Zip: MONTICELLO, FL 32344

Title: D () Delete
Name: SALANCY, FRED
Address: 945 RIDGE ROAD
City-St-Zip: MONTICELLO, FL 32344

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:

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: FRED SALANCY

SEC.

04/29/2009

Electronic Signature of Signing Officer or Director

Date