

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42664

FILED
Mar 10, 2008
Secretary of State

Entity Name: CROOKED LAKE RIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST STATE ROAD 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST STATE ROAD 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 59-3057941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MGMT INC
2180 W SR 434 #500
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 W SR 434 SUITE 5000
LONGWOOD, FL 32779 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: JAMES W HART JR

03/10/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: MARCHO, MICHAEL B
Address: 110 VISTA AVE
City-St-Zip: EUSTIS, FL 32726

Title: VPD () Delete
Name: LE BEHRZ, DIANA
Address: 137 MADRONA DR
City-St-Zip: EUSTIS, FL 32726

Title: SD () Delete
Name: TROENDLE, HEIDI
Address: 121 MADRONA DR
City-St-Zip: EUSTIS, FL 32726

Title: TD (X) Delete
Name: CHOROSINSKI, EUGENE C
Address: 131 MADRONA DR
City-St-Zip: EUSTIS, FL 32726

Title: D () Delete
Name: FORD, HERBERT
Address: 102 VISTA AVE
City-St-Zip: EUSTIS, FL 32726

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: LE BHERZ, DIANA
Address: 137 MADRONA DR
City-St-Zip: EUSTIS, FL 32726

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: FORD, HERBERT
Address: 102 VISTA AVE
City-St-Zip: EUSTIS, FL 32726

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: HERBERT FORD

PD

03/10/2008

Electronic Signature of Signing Officer or Director

Date