## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N44879

FILED Mar 16, 2008 Secretary of State

Entity Name: SUNDANCE RIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:		
	JNDANCE DRIV ITO, FL 32776	E US			
Current Mailing Address:			New Mailing Ac	New Mailing Address:	
PO BOX ( SORREN	0863 ITO, FL 327760	863 US			
FEI Numbe	er: 59-2973093	FEI Number Applied For()	FEI Number Not Applicable	( ) Certificate of Status Desired (X)	
Name an	d Address of C	urrent Registered Agent:	Name and Addr	ess of New Registered Agent:	
23720 SL SORREN The abov		Ë US	purpose of changing its reg	istered office or registered agent, or both,	
	te of Florida.				
SIGNATL		ic Signature of Registered A	nent	Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P/D () FRAZIER, REG 23604 SUNDAN	Delete INA CE DRIVE	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	CHANG, JANICI 23915 SUNDAN	CE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	KRAHENBUHL, 23720 SUNDAN	CE DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
City-St-Zip:		Delete	Title:	() Change () Addition	
	MILLER, WILLI 23336 SUNSET	AM VIEW DRIVE	Name: Address: City-St-Zip:		
City-St-Zip: Title: Name: Address:	MILLER, WILLI, 23336 SUNSET SORRENTO, FL D () CLAYPOOLE, E 30845 RIDGEC	AM VIEW DRIVE . 32776 Delete DENNIS REST TERRACE	Address: City-St-Zip: Title: D Name: GER/ Address: 2391	(X) Change ( ) Addition ALD, CHANG 5 SUNDANCE DRIVE RENTO, FL 32776	

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: ELIZABETH M. KRAHENBUHL T/D 03/16/2008