

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44879

FILED  
Feb 02, 2011  
Secretary of State

**Entity Name:** SUNDANCE RIDGE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

23720 SUNDANCE DRIVE  
SORRENTO, FL 32776 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 0863  
SORRENTO, FL 327760863 US

**New Mailing Address:**

FEI Number: 59-2973093      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

KRAHENBUHL, ELIZABETH T/D  
23720 SUNDANCE DRIVE  
SORRENTO, FL 32776 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: P/D  
Name: KENTALA, WILLIAM  
Address: P.O. BOX 863  
City-St-Zip: SORRENTO, FL 32776

Title: VP/D  
Name: CHANG, JANICE  
Address: P.O. BOX 863  
City-St-Zip: SORRENTO, FL 32776

Title: T/D  
Name: KRAHENBUHL, ELIZABETH  
Address: 23720 SUNDANCE DRIVE  
City-St-Zip: SORRENTO, FL 32776

Title: S/D  
Name: JOHNS, MARTHA  
Address: P.O. BOX 863  
City-St-Zip: SORRENTO, FL 32776

Title: D  
Name: MERTING, JAMES  
Address: P.O. BOX 863  
City-St-Zip: SORRENTO, FL 32776

Title: D  
Name: LORTON, CHRISTOPHER  
Address: P.O. BOX 863  
City-St-Zip: SORRENTO, FL 32776

I hereby 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 all other like empowered.

SIGNATURE: ELIZABETH M KRAHENBUHL

T/D

02/02/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date