

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham,</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N46720 (1)**  
1. Corporation Name  
**GENESIS COMMUNITIES OF RIDGEWOOD HOME OWNER'S AS  
SOCIATION, INC.**



Principal Place of Business <b>P.O. BOX 700 ELLENTON FL 34222</b>	Mailing Address <b>6330 COCONUT GROVE CIRCLE ELLENTON FL 34222 US</b>
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3. Date Incorporated or Qualified <b>01/07/1992</b>
4. FEI Number <b>65-0301554</b>
Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business <b>21</b> Suite, Apt. #, etc.	2a. Mailing Address <b>26</b> Suite, Apt. #, etc.
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent <b>MURPHY, JOHN 6830 COCONUT GROVE CIRCEL ELLENTON FL 34222</b>
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10. Name and Address of New Registered Agent <b>81 Name YARBRO, ROBERT L. 82 Street Address (P.O. Box Number is Not Acceptable) 2904 CITRUS COURT 83 84 City ELLENTON FL 85 Zip Code 34222</b>
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Robert L. Yarbrow 19 January 1998  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>MURPHY, JOHN</b>		1.2 NAME <b>YARBRO, ROBERT L.</b>	
STREET ADDRESS <b>6830 COCONUT GROVE CIRCLE</b>		1.3 STREET ADDRESS <b>2904 CITRUS COURT</b>	
CITY-ST-ZIP <b>ELLENTON FL</b>		1.4 CITY-ST-ZIP <b>ELLENTON, FL</b>	
TITLE <b>VP</b>	<input checked="" type="checkbox"/> DELETE	2.1 TITLE <b>VP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>MCRAE, LESLIE</b>		2.2 NAME <b>PFAHLER, WILLIAM B.</b>	
STREET ADDRESS <b>3008 KIWI PLACE</b>		2.3 STREET ADDRESS <b>3206 WOODY COURT</b>	
CITY-ST-ZIP <b>ELLENTON FL</b>		2.4 CITY-ST-ZIP <b>ELLENTON, FL</b>	
TITLE <b>T</b>	<input type="checkbox"/> DELETE	3.1 TITLE <b>T</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>NIGRO, MARY</b>		3.2 NAME <b>SAME</b>	
STREET ADDRESS <b>3004 KIWI PLACE</b>		3.3 STREET ADDRESS	
CITY-ST-ZIP <b>ELLENTON FL</b>		3.4 CITY-ST-ZIP	
TITLE <b>S</b>	<input checked="" type="checkbox"/> DELETE	4.1 TITLE <b>S</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>YARBRO, ROBERT</b>		4.2 NAME <b>MOENCH, CARMEN</b>	
STREET ADDRESS <b>2904 CITRUS COURT</b>		4.3 STREET ADDRESS <b>6877 COCONUT GROVE CIRCLE</b>	
CITY-ST-ZIP <b>ELLENTON FL</b>		4.4 CITY-ST-ZIP <b>ELLENTON, FL</b>	
TITLE <b>D</b>	<input checked="" type="checkbox"/> DELETE	5.1 TITLE <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>EBERL, PHYLLIS</b>		5.2 NAME <b>COLBOW, MARY LOU</b>	
STREET ADDRESS <b>3115 RIDGEWOOD BLVD</b>		5.3 STREET ADDRESS <b>3016 SABAL CIRCLE</b>	
CITY-ST-ZIP <b>ELLENTON FL</b>		5.4 CITY-ST-ZIP <b>ELLENTON, FL</b>	
TITLE <b>D</b>	<input type="checkbox"/> DELETE	6.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>FLANAGAN, BUD</b>		6.2 NAME <b>FLANAGAN, BUD</b>	
STREET ADDRESS <b>7015 DATE PALM LANE</b>		6.3 STREET ADDRESS <b>7015 DATE PALM</b>	
CITY-ST-ZIP <b>ELLENTON FL</b>		6.4 CITY-ST-ZIP <b>ELLENTON, FL</b>	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Robert L. Yarbrow 19 January 1998 941-729-1024

CR2E037 (10/97)