## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N46964

FILED Apr 30, 2005 Secretary of State

Entity Name: HASSON RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:	
	SON RIDGE NT, FL 34711	US		
Current Mailing Address:			New Mailing Address:	
	SON RIDGE NT, FL 34711	US		
El Number	:	FEI Number Applied For ( )	FEI Number Not Applicable (X)	Certificate of Status Desired ( )
ame and	l Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
744 HAS	ON, RICHARD SON RIDGE NT, FL 34711	US		
	e named entity s e of Florida.	submits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,
the State	e of Florida.	submits this statement for the p	purpose of changing its registere	ed office or registered agent, or both,
the State	e of Florida. RE:	submits this statement for the particles of Registered Agric Signature of Registered Agric		ed office or registered agent, or both,  Date
the State	e of Florida. RE:	ic Signature of Registered Ag	ent	
the State	e of Florida.  RE: Electron  S AND DIRECT	ic Signature of Registered Ag FORS:  Delete ERNIE RIDGE	ent	Date
the State IGNATUI  FFICER Idle:	e of Florida.  RE: Electron  S AND DIRECT  D () THOMPSON, BE 9732 HASSON F CLERMONT, FL	ic Signature of Registered Agr FORS:  Delete ERNIE RIDGE 34711  Delete R	ent  ADDITIONS/CHANG  Title: Name: Address:	Date SES TO OFFICERS AND DIRECTOR
the State IGNATUI  FFICER: tle: ame: ddress:	e of Florida.  RE: Electron  S AND DIRECT  D () THOMPSON, BE 9732 HASSON F CLERMONT, FL  D () BROOKS, SHAF 9715 HASSON F CLERMONT, FL	ic Signature of Registered Ag  FORS:  Delete ERNIE RIDGE 34711  Delete RIDGE 34711  Delete RIDGE 134711  Delete ICHARD RIDGE	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  SES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD CREIGHTON D 04/30/2005