

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001910

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: COBB'S RIDGE HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

2684 WINDSONG CIR  
PALM HARBOR, FL 34684 US

## New Principal Place of Business:

2755 ASTER DRIVE  
PALM HARBOR, FL 34684 US

## Current Mailing Address:

PO BOX 23  
PALM HARBOR, FL 34682 US

## New Mailing Address:

COBB'S RIDGE HOA  
P.O. BOX 23  
PALM HARBOR, FL 34682 US

FEI Number: 59-3182827      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DAVIS, TERRI  
2684 WINDSONG CIR  
PALM HARBOR, FL 34684 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: S ( ) Delete  
Name: MILINDER, SCOTT  
Address: 2720 WINDSONG CIR  
City-St-Zip: PALM HARBOR, FL 34684

Title: P ( ) Delete  
Name: BEDFORD, ELIZABETH  
Address: 2755 ASTER DRIVE  
City-St-Zip: PALM HARBOR, FL 34684

Title: TRES ( ) Delete  
Name: DAVIS, TERRI  
Address: 2684 WINDSONG CIR  
City-St-Zip: PALM HARBOR, FL 34684

Title: VP ( ) Delete  
Name: JIMENEZ, ABNER  
Address: 2541 MULBERRY DR  
City-St-Zip: PALM HARBOR, FL 34684

Title: D ( ) Delete  
Name: SAVOCA, VINNY  
Address: 2489 MULBERRY DR  
City-St-Zip: PALM HARBOR, FL 34684

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: FISHER, KALLY  
Address: 2621 ASTER DRIVE  
City-St-Zip: PALM HARBOR, FL 34684

Title: P (X) Change ( ) Addition  
Name: BEDFORD, ELIZABETH  
Address: 2755 ASTER DRIVE  
City-St-Zip: PALM HARBOR, FL 34684

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

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

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

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: TERRI DAVIS

TRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date