2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000004396

Entity Name: IVY RIDGE HOMEOWNERS ASSOCIATION, INC.

FILED Apr 16, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 325 SOUTH BLVD. 3974 TAMPA ROAD TAMPA, FL 33606 OLDSMAR, FL 34677 **Current Mailing Address:** New Mailing Address: 325 SOUTH BLVD PO BOX 2157 TAMPA, FL 33606 OLDSMAR, FL 34677 FEI Number: 59-3207374 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HANSON, JACK B HANSON, JACK B 325 SOUTH BLVD 3974 TAMPA ROAD TAMPA, FL 33606 US OLDSMAR, FL 34677 US 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: 04/16/2002 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition JOHNSON, ALLEN JOHNSON, ALLEN Name: Name: 4320 LAVENDER DR Address: 4320 LAVENDER DR Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: PALM HARBOR, FL 34685 Title: () Delete Title: (X) Change () Addition HAIGHTDVP, DONALD Name: HAIGHT, DONALD Name: Address: 3596 FLORIAN TERR. Address: 3596 FLORIAN TERR. City-St-Zip: PALM HARBOR, FL City-St-Zip: PALM HARBOR, FL 34685 Title: DVP () Delete Title: () Change () Addition WILFORD, WAYNE Name: Name: Address: 3548 FLORIAN TERRACE Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: Title: DS () Delete Title: DS (X) Change () Addition BRUNETTI, DEBBIE Name: Name: CUNNINGHAM, GENE 4358 WHEATLAND WAY Address: 3545 HALBERT DRIVE Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: PALM HARBOR, FL 34685 Title: () Delete Title: () Change () Addition PIETRZAK, CATHY Name: Name: 3545 FLORIAN TERR. Address: Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip:

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: DON HAIGHT DP 04/16/2002