

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004396

FILED
Apr 24, 2008
Secretary of State

Entity Name: IVY RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683

New Principal Place of Business:

Current Mailing Address:

PO BOX 1418
PALM HARBOR, FL 34682

New Mailing Address:

3527 PALM HARBOR BLVD.
PALM HARBOR, FL 34683

FEI Number: 59-3207374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HANSON, JACK B
MELROSE MANAGEMENT GROUP
3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

HANSON, JACK B
MELROSE-SOVEREIGN COMPANIES
3527 PALM HARBOR BLVD
PALM HARBOR, FL 34683 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: JACK B HANSON

04/24/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HAIGHT, DON
Address: 3596 FLORIAN TERRACE
City-St-Zip: PALM HARBOR, FL 34685

Title: VPD () Delete
Name: WOOD, DON
Address: 4301 LAVENDER DR
City-St-Zip: PALM HARBOR, FL 34685

Title: SD () Delete
Name: VANSKOY, ROBIN
Address: 3561 FLORIAN TERRACE
City-St-Zip: PALM HARBOR, FL 34685

Title: TD () Delete
Name: ROBERTS, DERECK
Address: 4319 LAVENDER DR
City-St-Zip: PALM HARBOR, FL 34685

Title: D () Delete
Name: HUBER, PETER
Address: 4486 LAVENDER DR
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: WOOD, DON
Address: 4301 LAVENDER DR
City-St-Zip: PALM HARBOR, FL 34685

Title: TD (X) Change () Addition
Name: VANSKOY, ROBIN
Address: 3561 FLORIAN TERRACE
City-St-Zip: PALM HARBOR, FL 34685

Title: VPD (X) Change () Addition
Name: WILFORD, WAYNE
Address: 3548 FLORIAN TERRACE
City-St-Zip: PALM HARBOR, FL 34685

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: DON HAIGHT

PD

04/24/2008

Electronic Signature of Signing Officer or Director

Date