## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## May 05, 2006 8:00 am Secretary of State DOCUMENT # N9400000195 05-05-2006 90156 045 \*\*\*\*61.25 1. Entity Name RIDAUGHT LANDING THREE ASSOCIATION, INC. Principal Place of Business Mailing Address quuovavo PROFESSIONAL COMMUNITY MGT, INC PROFESSIONAL COMMUNITY MGT, INC 786 BLANDING BLVD, #118 786 BLANDING BLVD, #118 ORANGE PARK, FL 32065 ORANGE PARK, FL 32065 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04262006 Chg-NP CR2E037 (11/05) FEI Number 59-3227622 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Signature Realty + Management ( BRYAN CANTRAL PERRY, ALAN 786 BLANDING BLVD, #118 ORANGE PARK, FL, 32065 Street Address (P.O. Box Number is Not Acceptable) Hortley Rol <sup>෭</sup>෦෦෮෮෮ඁඁඁ 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. TITLE ☐ Addition TITLE Delete ☐ Change NAME VACHON, ELIZABETH NAME STREET ADDRESS 2943 BILOXI TRAIL STREET ADDRESS MIDDLEBURG, FL 32068 CITY+ST-ZiP CITY-ST-ZIP TITLE Change TITLE Delete ☐ Addition MCMULLIN, SUSIE NAME NAME 2987 CHIEF RIDAUGHT TR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIDDLEBURG, FL 32068 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE TAYLOR KEN MARKE NAME 2818 TUSCARORA TR STREET ADDRESS STREET ADDRESS MIDDLEBURG, FL 32068 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition MCGOVERN, SHEILA NAME NAME STREET ADDRESS 2848 TUSCARORA TR STREET ADDRESS MIDDLEBURG, FL 32068 CITY-ST-Z: TITLE ☐ Delete TITLE Change ☐ Addition CURTIS, CAROL NAME NAME STREET ADDRESS 2827 TUSCARORA TR STREET ADDRESS MIDDLEBURG, FL 32068 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as it 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**