## 2005 NOT-FOR-PROFIT CORPORATION

## ANNUAL REPORT **DOCUMENT # N94000002866**

1. Entity Name
SOLITHERINGE CONDOMINIUM NO. 5 ASSOCIATION



**FILED** Apr 26, 2005 8:00 am Secretary of State

04-26-2005 90147 039 \*\*\*\*61.25

INC.	RIDGE CONDOMINION NO	, 3 A33	JCIATION,							
Principal Place of Business C/O PEGASUS PROPERTY MANAGEMENT, INC. 17595-100 S TAMIAMI TR FORT MYERS, FL 33908 US		Mailing Address C/O PEGASUS PROPERTY MANAGEMENT, INC. 17595-100 S TAMIAMI TR FORT MYERS, FL 33908 US								
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				03022005	Chg-NP	CR2E037	(10/03)	
City & State		City & State				4. FEI Number 65-05270	092			plied For Applicable
Zip	Country	Country Zip		Country		5. Certificate of	Status Desired		3.75 Addi e Required	
	6. Name and Address of Current	Registered	Agent			7. Name and A	ddress of New	Registered Age	ent	
STILSON, BARBARA A EATON				Name						ļ
PEGASUS PROPERTY MGMT 17595 SOUTH TAMIAMI TRAIL # 100			Street Address			(P.O. Box Number is Not Acceptable)				
FORT MYERS, FL 33908										
				City				FL	Zip Code	
	named entity submits this statement for ions of registered agent.	r the purpos	e of changing its r	egistered office o	r register	red agent, or both,	in the State of I	Florida. I am fan	niliar with, i	and accept
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applic	sble. (NOTE:	Registered Agent signa	ture required	I when reinstating)	<del></del>	DATE		
Filing Fee is \$61.25 Due by May 1, 2005			9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees	1	Make check p orlda Departm		1
10. OFFICERS AND DIRECTOR				11.		ADDITIONS/CHAI	NGES TO OFFIC	ERS AND DIRE	CTORS IN	10
TITLE	VPD .		☐ Delete	TITLE	PD				Change	Addition
NAME	JUDGE, ROBERT			NAME				·		
STREET ADDRESS	3470 BALLYBRIDGE CIRCLE #2	201		STREET ADDRESS CITY-ST-ZIP						
CITY-ST-ZIP	BONITA SPGS, FL 34134 PTD			<del></del>	STI			· ·	Change	Addition
TITLE NAME	MURRAY, BRUCE		Delete	TITLE NAME	211			9	& crange	
STREET ADDRESS	3451 BALLYBRIDGE CIRCLE #2	101		STREET ADDRESS						
City-St-ZIP	BONITA SPGS, FL 34134			CITY-ST-ZIP	ļ., <u> </u>	· · · · · · · · · · · · · · · · · · ·		<del></del> .		
TITLE	SD		☐ Delete	TITLE	VPD	•		5	Change	☐ Addition
NAME STREET ADDRESS	GRYWALSK8I, FRANK 3470 BALLYBRIDGE CIR #202			NAME STREET ADDRESS						
CITY-ST-ZIP	BONITA SPRINGS, FL 34134			CITY-ST-ZIP						İ
TITLE			☐ Delete	TITLE					Change	Addition
NAME				NAME						
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP						
TITLE			☐ Delete	TITLE					Change	Addition
NAME				NAME						
STREET ADDRESS				STREET ADDRESS						
CITY-ST-ZIP				CITY-ST-ZIP	-				Change	☐ Addition
	<del> </del>									
TITLE			☐ Delete	TITLE	}			L	Change	C VOCITION
NAME			Delete	NAME STREET ADDRESS				ľ	Change	CT ADDITION
			L_J Delete	NAME					Change	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachatent with an address, with all other like empowered.

SIGNATURE:

ROBERT TJUDGE TREASURER

4/24/05 235.293-572/ Daytime Phone #