

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000003014

**FILED**  
**Jun 15, 2011**  
**Secretary of State**

**Entity Name:** SKYRIDGE TERRACE PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

37520 SKYRIDGE CR  
DADE CITY, FL 33525

**New Principal Place of Business:**

37506 SKYRIDGE CR  
DADE CITY, FL 33525

**Current Mailing Address:**

37520 SKYRIDGE CR  
DADE CITY, FL 33525

**New Mailing Address:**

37506 SKYRIDGE CR  
DADE CITY, FL 33525

**FEI Number:** 59-3629780

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SUTTON, SANDRA A  
37520 SKYRIDGE CIRCLE  
DADE CITY, FL 33525 US

**Name and Address of New Registered Agent:**

BERRY, SHERILYNN  
37506 SKYRIDGE CIRCLE  
DADE CITY, FL 33525 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: SHERILYNN BERRY

06/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SEC  
Name: BERRY, SHERILYNN  
Address: 37506 SKY RIDGE CR  
City-St-Zip: DADE CITY, FL 33525

Title: P  
Name: WILLIAMS, STEVE  
Address: 37552 SKYRIDGE CIR  
City-St-Zip: DADE CITY, FL 33525

I hereby 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 all other like empowered.

SIGNATURE: SHERILYNN BERRY

SEC

06/15/2011

Electronic Signature of Signing Officer or Director

Date