

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005832

FILED  
Jan 17, 2009  
Secretary of State

**Entity Name:** HIGH RIDGE TRAIL MAINTENANCE ASSOCIATION, INC.

**Current Principal Place of Business:**

2801 SW COLLEGE RD  
SUITE 1  
OCALA, FL 34474

**New Principal Place of Business:**

2801 SW COLLEGE RD  
SUITE 9  
OCALA, FL 34474

**Current Mailing Address:**

501 PAWNEE TRAIL  
MAITLAND, FL 32751

**New Mailing Address:**

**FEI Number:** 59-3327829

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MACKAY, DAVID L  
2801 SW COLLEGE RD  
SUITE 1  
OCALA, FL 34474 US

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

MACKAY, DAVID L  
2801 SW COLLEGE RD  
SUITE 9  
OCALA, FL 34474 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: DAVID L MACKAY

01/17/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MACKAY, GEORGE  
Address: 501 PAWNEE TRAIL  
City-St-Zip: MAITLAND, FL 32751

Title: D ( ) Delete  
Name: MACKAY, DAVID L.  
Address: 2801 SW COLLEGE RD., SUITE 1  
City-St-Zip: OCALA, FL 34474

Title: DS ( ) Delete  
Name: MACKAY, GEORGE  
Address: 501 PAWNEE TRAIL  
City-St-Zip: MAITLAND, FL 32751

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MACKAY, GEORGE  
Address: 501 PAWNEE TRAIL  
City-St-Zip: MAITLAND, FL 32751 US

Title: D (X) Change ( ) Addition  
Name: MACKAY, DAVID L.  
Address: 2801 SW COLLEGE RD., SUITE 9  
City-St-Zip: OCALA, FL 34474 US

Title: DS (X) Change ( ) Addition  
Name: MACKAY, GEORGE  
Address: 501 PAWNEE TRAIL  
City-St-Zip: MAITLAND, FL 32751 US

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: GEORGE MACKAY

P

01/17/2009

Electronic Signature of Signing Officer or Director

Date