

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000076

FILED
Mar 26, 2009
Secretary of State

Entity Name: PARK RIDGE ON LAKE MINNEOLA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-3355271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
C/O SENTRY MANAGEMENT INC.
2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOYE, RANDALL JR
Address: 832 PARK VALLEY CIR
City-St-Zip: MINNEOLA, FL 34715

Title: VPD () Delete
Name: ROY, ROBERT
Address: 763 PARK VALLEY CIR
City-St-Zip: MINNEOLA, FL 34715

Title: SD () Delete
Name: OKEEFE, FRANK
Address: 812 MEADOW PARK DR
City-St-Zip: MINNEOLA, FL 34715

Title: TD () Delete
Name: CAMPBELL, GINA
Address: 801 PARK VALLEY CIR
City-St-Zip: MINNEOLA, FL 34715

Title: D () Delete
Name: DAY, WALTER R
Address: 614 PARK VALLEY CIR
City-St-Zip: MINNEOLA, FL 34715

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: BECHTOL, DEBRAH
Address: 806 PARK VALLEY CIR
City-St-Zip: MINNEOLA, FL 34715

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: RANDALL MOYE JR

PD

03/26/2009

Electronic Signature of Signing Officer or Director

Date