2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001697

FILED Apr 03, 2009 Secretary of State

Entity Name: CEDAR RIDGE ESTATES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 100 FOREST ROAD BOYNTON BEACH, FL 33426 **Current Mailing Address: New Mailing Address:** C/O CMC MANAGEMENT INC 2950 JOG ROAD GREENACRES, FL 33467 FEI Number: 65-0739784 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DICKER, KRIVOK, & STOLOFF, PA 1818 AUSTRALIAN AVENUE SOUTH SUITE 400 WEST PALM BEACH, FL 33409 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KING, MICHAEL Name: Name: 10 REDWOOD CT Address: Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: Title: Title: (X) Change () Addition () Delete SELKE, JOEL Name: LENGEL, VICKIE Name: Address: 9 REDWOOD CT Address: 11 REDWOOD CT City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: BOYNTON BEACH, FL 33426 Title: SEC () Delete Title: **TREA** (X) Change () Addition UNDERWOOD, DANNY UNDERWOOD, DANNY Name: Name: Address: 28 MAPLEWOOD CT Address: 28 MAPLEWOOD CT City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: BOYNTON BEACH, FL 33426 Title: TREA () Delete Title: SECT (X) Change () Addition Name: UNDERWOOD, DANNY Name: ROJAS SUSAN 22 PEPPERWOOD Address: 28 MAPLEWOOD CT Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: BOYNTON BEACH, FL 33426 Title: () Delete Title: () Change (X) Addition TAYLOR, JAYE Name: Name: 19 PEPPERWOOD Address: Address: BOYNTON BEACH, FL 33426 City-St-Zip: City-St-Zip:

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: DANNY UNDERWOOD TREA 04/03/2009