

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 07, 2010
Secretary of State

Entity Name: DEER RIDGE AT RIVER RIDGE PHASE I HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6014 US HWY 19 N
SUITE 504
NEW PORT RICHEY, FL 34652 US

New Principal Place of Business:

Current Mailing Address:

6014 US HWY 19 N
SUITE 504
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

FEI Number: 59-3386703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLEY, HELEN
C/O CREATIVE MANAGEMENT
6014 US HWY 19 N, SUITE 504
NEW PORT RICHEY, FL 34652 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: DP
Name: GALLUP, EMERSON
Address: 6014 US HWY 19 N, SUITE 504
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: DVP
Name: DUDEK, GREGORY
Address: 6014 US HWY 19 N, SUITE 504
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: DT
Name: GAUBY, WILLIAM
Address: 6014 US HWY 19 N, SUITE 504
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: DS
Name: MCDOWELL, JERI
Address: 6014 US HWY 19 N, SUITE 504
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: D
Name: LEWIS, STEPHEN
Address: 6014 US HWY 19 N, SUITE 504
City-St-Zip: NEW PORT RICHEY, FL 34652 US

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: HELEN KELLEY

MGR

02/07/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date