## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000000780

FILED Mar 22, 2007 Secretary of State

Entity Name: COUNTRY RIDGE HOMEOWNER'S ASSOCIATION, INC.

Current Pr	incipal Plac	e of Business:	New Principal Plac	e of Business:
3931 SW 4 <sup>-</sup>	7TH AVE			
SUITE 104	20244			
DAVIE, FL	33314			
Current Mailing Address:		New Mailing Addre	New Mailing Address:	
3931 SW 4 <sup>-</sup>	7TH AVE			
SUITE 104				
DAVIE, FL	33314			
El Number:	65-0745444	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:
SLORP, KI				
3931 SW 4 <sup>-</sup> SUITE 104	/ IH AVE			
	33314 US			
		submits this statement for the	purpose of changing its register	red office or registered agent, or both,
n the State	of Florida.	/ submits this statement for the	purpose of changing its register	red office or registered agent, or both,
n the State	of Florida.			
n the State	of Florida.	y submits this statement for the onic Signature of Registered Ag		red οπice or registered agent, or both,  Date
n the State SIGNATUR	of Florida.	onic Signature of Registered Ag	ent	
n the State SIGNATUR	of Florida. E: Electro	onic Signature of Registered Ag	ent	Date
n the State SIGNATUR  DFFICERS  Title: Jame:	of Florida.  Electro  AND DIRECTOR  P,D ( MENDEZ, KE	onic Signature of Registered Ag CTORS: ) Delete VIN	ent  ADDITIONS/CHAN  Title: Name:	Date  GES TO OFFICERS AND DIRECTOR
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I hereby certify that the information supplied with this filing does not qualify for the 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: KIMBERLY SLORP TD 03/22/2007