

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001015

FILED  
Apr 30, 2006  
Secretary of State

**Entity Name:** SADDLERIDGE ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PO BOX 7793  
ZEPHYRHILLS, FL 33544

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 7793  
ZEPHYRHILLS, FL 33544

**New Mailing Address:**

**FEI Number:** 59-3427431

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHARLOT, RANDY  
6201 BRIDLEFORD DRIVE  
WESLEY CHAPEL, FL 33544 US

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

HAMILTON, DEBRA PD  
6130 BRIDLEFORD DRIVE  
WESLEY CHAPEL, FL 33544 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: DEBRA HAMILTON

04/30/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: BONNIE, DUVALL  
Address: 29707 WEYBRIDGE WAY  
City-St-Zip: ZEPHYRHILLS, FL 33544

Title: PD ( ) Delete  
Name: HAMILTON, DEBRA  
Address: 6130 BRIDLEFORD DR  
City-St-Zip: ZEPHYRHILLS, FL 33544

Title: DVP ( ) Delete  
Name: CHALOT, RANDY  
Address: 6201 BRIDLEFORD DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33544

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

Title: SD (X) Change ( ) Addition  
Name: JONES, COLEEN D  
Address: 6404 BRIDLEFORD DRIVE  
City-St-Zip: ZEPHYRHILLS, FL 33544

Title: VPD (X) Change ( ) Addition  
Name: SMITH, RON  
Address: 6442 BRIDLEFORD DR  
City-St-Zip: ZEPHYRHILLS, FL 33544

Title: PD (X) Change ( ) Addition  
Name: HAMILTON, DEBRA  
Address: 6130 BRIDLEFORD DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33544

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: DEBRA HAMILTON

PD

04/30/2006

Electronic Signature of Signing Officer or Director

Date