## 2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N97000003454

Address:

City-St-Zip:

2514 PARIS MILL ROAD

JACKSONVILLE, FL 32221

T FILED
Dec 17, 2009
Secretary of State

Entity Name: WEST RIDGE ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4003 HARTLEY RD 12187 BEACH BLVD. JACKSONVILLE, FL 32257 SUITE 4 LIS JACKSONVILLE, FL 32246 US **Current Mailing Address:** New Mailing Address: 4003 HARTLEY RD 12620-3 BEACH BLVD. #301 JACKSONVILLE, FL 32257 US JACKSONVILLE, FL 32246 US FEI Number: 59-3470502 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: CANTRELL, BRYAN JARNUTOWSKI, SHERRIE 4003 HARTLEY RD 12620-3 BEACH BLVD. #301 JACKSONVILLE, FL 32257 US US JACKSONVILLE, FL 32246 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: SHERRIE JARNUTOWSKI 12/17/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BEASLEY, JANELLE Name: Name: 10369 SUGAR GROVE RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: Title: 1VD ( ) Delete Title: () Change () Addition Name: PAGE, DARRELL Name: Address: 2522 PARIS MILL RD Address: City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: Title: 2VD () Delete Title: () Change () Addition CHAMBLISS, MICHAEL Name: Name: 2402 MALLORY HILLS RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: Title: ST ( ) Delete Title: () Change () Addition Name: CALABRO, MICHAEL Name:

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.

Address:

City-St-Zip:

SIGNATURE: SHERRIE JARNUTOWSKI RA 12/17/2009