

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002518

FILED
Apr 30, 2007
Secretary of State

Entity Name: ROCK SPRINGS RIDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

882 JACKSON AVE.
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

882 JACKSON AVE.
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-3511407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JORDAN, BRETT
882 JACKSON AVE.
WINTER PARK, FL 32789 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: VP () Delete
Name: RAY, KEVIN
Address: 3416 KILMARNOCK DR
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: FRANKE, LINDA
Address: 645 CHEVIOTS COURT
City-St-Zip: APOPKA, FL 32712

Title: PD () Delete
Name: GREGO, SAM
Address: 525 HEBRIDES COURT
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: GREENE, JAMES
Address: 444 LANARKSHIRE PLACE
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: ROSENCRANS, LISA
Address: 3624 HADDINGTON COURT
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: HIBLER, FRANK
Address: 913 GULF LAND DRIVE
City-St-Zip: APOPKA, FL 32712

Title: DST (X) Change () Addition
Name: FRANKE, LINDA
Address: 645 CHEVIOTS COURT
City-St-Zip: APOPKA, FL 32712

Title: D (X) Change () Addition
Name: GERACI, JCATHERINE
Address: 529 SAND WEDGE LOOP
City-St-Zip: APOPKA, FL 32712

Title: DP (X) Change () Addition
Name: GREENE, JAMES
Address: 444 LANARKSHIRE PLACE
City-St-Zip: APOPKA, FL 32712

Title: D (X) Change () Addition
Name: HAMILTON, MAURICE
Address: 660 GRAMPIAN CT.
City-St-Zip: APOPKA, FL 32712

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: JAMES GREENE

DP

04/30/2007

Electronic Signature of Signing Officer or Director

Date