

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001241

FILED
Mar 22, 2009
Secretary of State

Entity Name: COLONY RIDGE PHASE I OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

2475 BELL RIDGE DRIVE
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

2475 BELL RIDGE DRIVE
CRESTVIEW, FL 32536

New Mailing Address:

2474 BELL RIDGE DRIVE
CRESTVIEW, FL 32536

FEI Number: 59-3566454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, RICHARD R
2475 BELL RIDGE DRIVE
CRESTVIEW, FL 32536 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: PD () Delete
Name: WILLIAMS, RICHARD R
Address: 2475 BELL RIDGE DRIVE
City-St-Zip: CRESTVIEW, FL 32536

Title: VD () Delete
Name: WILHELM, JAMES F
Address: 5550 FLATWOODS DRIVE
City-St-Zip: CRESTVIEW, FL 32536

Title: SD () Delete
Name: WILLIAMS, KATHEEN A
Address: 2475 BELL RIDGE DRIVE
City-St-Zip: CRESTVIEW, FL 32536

Title: TD () Delete
Name: CLARK, DAVID M
Address: 2474 BELL RIDGE DR
City-St-Zip: CRESTVIEW, FL 32536

Title: D () Delete
Name: SKARZYNSKI, DAVID L
Address: 2546 BELL RIDGE DRIVE
City-St-Zip: CRESTVIEW, FL 32536

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID M. CLARK

TD

03/22/2009

Electronic Signature of Signing Officer or Director

Date