

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90223 045 ****61.25

DOCUMENT # N99000003665

1. Entity Name

SHADY RIDGE HOMEOWNERS' ASSOCIATION, INC.

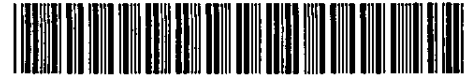


Principal Place of Business

3881 SHADY RIDGE RD
FT. LAUDERDALE FL 33312

Mailing Address

3881 SHADY RIDGE RD
FT. LAUDERDALE FL 33312



2. Principal Place of Business

3881 Shady Ridge Road
Suite, Apt. #, etc.

3. Mailing Address

3881 Shady Ridge Road
Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

FT. LAUDERDALE FL

City & State

FT. LAUDERDALE FL

4. FEI Number

65-0928184

Applied For

Not Applicable

Zip
33312-6203

Country
USA

Zip
33312-6203

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RYAN, CHRISTOPHER J
700 E. DANIA BCH BLVD.
DANIA BCH FL

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME PRIDISCO, TIMOTHY
STREET ADDRESS 3833 SHADY RIDGE RD.
CITY-ST-ZIP FT. LAUDERDALE FL 33312 ☐ Delete

TITLE VD
NAME STRAUCH, BARRY
STREET ADDRESS 3931 SHADY RIDGE RD.
CITY-ST-ZIP FT. LAUDERDALE FL 33312 ☐ Delete

TITLE STD
NAME COFFMAN, ARNOLD L
STREET ADDRESS 3881 SHADYRIDGE ROAD
CITY-ST-ZIP FT. LAUDERDALE FL 33312 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *Arnold L. Coffman* ARNOLD L. COFFMAN SEC. TREAS 2/23/06 954-989-4985