

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 31, 2008 08:00 AM
Secretary of State

DOCUMENT # N99000003665	
1. Entity Name SHADY RIDGE HOMEOWNERS' ASSOCIATION, INC.	

Principal Place of Business 3881 SHADY RIDGE RD FORT LAUDERDALE FL 33312-6203	Mailing Address 3881 SHADY RIDGE RD FORT LAUDERDALE FL 33312-6203
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/07)

City & State	City & State	4. FEI Number 65-0928184	Applied For ☐ Not Applicable
Zip	Country	Zip	Country

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
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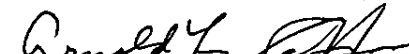
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ (Signature of person or persons authorized to register agent on behalf of corporation)	DATE _____ (NOTE: Registered Agent agent is required to be in the office)

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PRIDISCO, TIMOTHY 3833 SHADY RIDGE RD. FT. LAUDERDALE FL 33312 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STRAUCH, BARRY 3931 SHADY RIDGE RD. FT. LAUDERDALE FL 33312 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD COFFMAN, ARNOLD L 3881 SHADYRIDGE ROAD 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 U00000876286 04/11/08-80067-022 61.25
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
TITLE NAME STREET ADDRESS 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.
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SIGNATURE:  **ARNOLD L. COFFMAN** 3/26/08 9549894985