

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P95000059528

1. Entity Name
SOUTHRIDGE PROPERTIES, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 APR 15 PM 1:21

Principal Place of Business

COUNTY ROAD 561
TAVARES, FL 32778 US

Mailing Address

4117 COUNTY ROAD 561
TAVARES, FL 32778 US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

03212005

Chg-P

CR2E034 (10/03)

4. FEI Number

59-3359850

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STONE, LEWIS W
4850 N HWY 19A
MOUNT DORA, FL 32757

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

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT ☐ Delete
NAME BUTTERFIELD, CRAIG
STREET ADDRESS 14595 ROLLERCOASTER RD
CITY-ST-ZIP COLORADO SPRINGS, CO 80921

TITLE VP ☐ Delete
NAME BERENS, PATRICIA
STREET ADDRESS 6755 ROUND LAKE ROAD
CITY-ST-ZIP MOUNT DORA, FL 32757

TITLE VP ☐ Delete
NAME BERENS, THOMAS
STREET ADDRESS 81275 W 43RD PLACE
CITY-ST-ZIP GAINESVILLE, FL 32608

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME 100054016651
STREET ADDRESS 05/06/05--01069--014 **61.25
CITY-ST-ZIP

TITLE S ☒ Change ☐ Addition
NAME Berens, Patricia
STREET ADDRESS 6755 Round Lake Road
CITY-ST-ZIP Mount Dora, FL 32757

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

TITLE T ☐ Change ☒ Addition
NAME Butterfield, Elaine
STREET ADDRESS 14595 Rollercoaster Road
CITY-ST-ZIP Colorado Springs, CO 80921

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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:

Craig Butterfield

4/12/05

719-484-0550

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #