2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P95000088441

1. Entity Name

PANTHER RIDGE COMMUNITIES, INC.



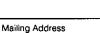
FILED Apr 17, 2008 08:00 AN Secretary of State

Principal Place of Business

303 NINTH STREET WEST

SUITE 201

BRADENTON, FL 34205



303 NINTH STREET WEST

SUITE 201

BRADENTON, FL 34205



01232008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0626382 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Regulred

6. Name and Address of Current Registered Agent

BUSKIRK, FRANK A 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees 000000901668 04/29/08-80078-007 150.00

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUSKIRK, FRANK A 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SUMMERS, STEVE E 303 NINTH STREET WEST BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BUSKIRK, FRANK A 303 NINTH STREET WEST BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS GRAVELY, JEFF 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BUSKIRK, FRANK A 303 NINTH STREET WEST BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT SUMMERS, STEVE E 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205

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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 ampowered 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 the information in the exemption of the composition of the compo

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4-10-08

941-750-9494

Daytime Phor