

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000560

**FILED
Apr 12, 2007
Secretary of State**

Entity Name: BUFFALO RIDGE WEST PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2001 S.E. TENTH STREET
BENTONVILLE, AR 727160550

New Principal Place of Business:

Current Mailing Address:

2001 S.E. TENTH STREET
BENTONVILLE, AR 727160550

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

EDWARDS, DAVID J
6 EAST BAY STREET STE 500
JACKSONVILLE, FL 32202 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: DP () Delete
Name: TULGETSKE, BARRI
Address: 2001 S.E. TENTH STREET
City-St-Zip: BENTONVILLE, AR 727160550

Title: DV () Delete
Name: ROGERS, BRAD
Address: 2001 S.E. TENTH STREET
City-St-Zip: BENTONVILLE, AR 727160550

Title: ST () Delete
Name: GOODNER, NICK
Address: 2001 S.E. TENTH STREET
City-St-Zip: BENTONVILLE, AR 727160550

Title: D () Delete
Name: DZURO, MARTY
Address: 1020 LAKE SUMTER LANDING
City-St-Zip: THE VILLAGES, FL 32162

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: BARRI TULGETSKE

DP

04/12/2007

Electronic Signature of Signing Officer or Director

Date