

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90190 002 ****61.25

DOCUMENT # 743199

1. Entity Name

RIVERS EDGE HOME OWNERS ASSOCIATION, INC.

Principal Place of Business

**P O BOX 510462
MELBOURNE BEACH FL 32951**

Mailing Address

**P O BOX 510462
MELBOURNE BEACH FL 32951**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-2381003**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CRISCIONE, JOHN
2300 S RIVER RD
MELBOURNE BEACH FL 32951**

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **ERICKSON, CARL**
STREET ADDRESS **2265 SEA HORSE DRIVE**
CITY-ST-ZIP **MELBOURNE BEACH FL 32951**

TITLE **TD** ☐ Delete
NAME **CRISCIONE, JOHN**
STREET ADDRESS **2300 S RIVER RD**
CITY-ST-ZIP **MELBOURNE BCH FL 32951**

TITLE **PD** ☐ Delete
NAME **NABERHAUS, ROBERT**
STREET ADDRESS **350 AMBERJACK PL**
CITY-ST-ZIP **MELBOURNE BCH FL 32951**

TITLE **D** ☐ Delete
NAME **WESTERFIELD, RUSSELL**
STREET ADDRESS **2240 SEA HORSE DR**
CITY-ST-ZIP **MELBOURNE BEACH FL 32951**

TITLE **D** ☐ Delete
NAME **NOBLE SUE**
STREET ADDRESS **330 MARLIN PLACE**
CITY-ST-ZIP **MELBOURNE BEACH FL 32951**

TITLE **D** ☐ Delete
NAME **MARTINELLO, LORETTA**
STREET ADDRESS **2220 S. RIVER RD**
CITY-ST-ZIP **MELBOURNE BCH FL 32951**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☐ Change ☒ Addition
NAME **RICHARD ROBECKI**
STREET ADDRESS **2240 S. RIVER RD**
CITY-ST-ZIP **MELBOURNE BEACH, FL 32951**

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

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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 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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/02

321-724-5203

Date

Daytime Phone #

CR2E037 (9/01)