

2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Mar 24, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # N01000003391

1. Entity Name  
RIO VISTA HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business  
1702 SOUTH WASHINGTON AVE  
TITUSVILLE, FL 32780

Mailing Address  
1702 SOUTH WASHINGTON AVE  
TITUSVILLE, FL 32780

**DO NOT WRITE IN THIS SPACE**



03112005 No Chg-NP CR2E037 (10/03)

4. FEI Number  
32-0033032

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

EVANS, JOHN H ESQ  
1702 SOUTH WASHINGTON AVE  
TITUSVILLE, FL 32780

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IN THIS SPACE**

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

Filing Fee Is \$61.25  
Due by May 1, 2005

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPV
NAME	MCDONALD, LOU
STREET ADDRESS	7790 GROVEWOOD DRIVE
CITY-ST-ZIP	LAKE WORTH, FL 33467
TITLE	ST
NAME	MCDONALD, LOU
STREET ADDRESS	7790 GROVEWOOD DRIVE
CITY-ST-ZIP	LAKE WORTH, FL 33467
TITLE	D
NAME	MCDONALD, BIRGITTA
STREET ADDRESS	7790 GROVEWOOD DRIVE
CITY-ST-ZIP	LAKE WORTH, FL 33467
TITLE	D
NAME	RICHARD, MICHELLE
STREET ADDRESS	1702 SOUTH WASHINGTON AVE
CITY-ST-ZIP	TITUSVILLE, FL 32780
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000275258  
11/24/05-80043-012 61.25

**DO NOT WRITE  
IN THIS SPACE**

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: *B. McDonald* B. MCDONALD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 21/05

Date

561-969-1038

Daytime Phone #