FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # N06415

(6)

RIVER RUN CONDOMINIUM ASSOCIATION OF HERNANDO COUNTY, INC.

Principal Place of Business Mailing Address					t idaniras mir mairm diets dinne trant mitt fratt atati albit alfift frifit fifft fifft	
147 BELCHE	147 BELCHER RD	HER RD				
STE - 2		STE - 2				
LARGO FL 3	4641	LARGO FL 34641			2 Data have a last a la	
U\$		US			3. Date incorporated or Qualified 3a. Date of Last Report 05/01/1995	
Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	
Suite Ant	# oto	26			59-2464986 Not Applicab	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	
City & Stat	е	City & State			6. Election Campaign Financing \$5.00 May Be	
Zip	Country	Zip	Count	ry	Trust Fund Contribution Added to Fees This corporation has liability for Intangible tax under s. 199.032,	
4	25	29	30		Florida Statutes	
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Registered Agent	
5 .0 5 .0.	. ==		8	1 Name	,	
	I, Brian P I properties inc.		8		t Address (P.O. Box Number is Not Acceptable)	
	CHER RD N.E.		a		7 BELCHER ROAD SUITE 2	
	FL 34641					
				4 City LAF	RGO FL 85 Zip Code 34641	
11. Pursuant	to the provisions of Sections 617.050	02 and 617.1508, Florida Statutes	s, the above	named c	corporation submits this statement for the purpose of sharping its life of	
iariii:ar wi	im, and accept the obligations of, Sec	ction 617,0503, Florida Statutes.	a by the co	rporation's	s board of directors. I hereby accept the appointment as registered agent. I am	
SIGNATURE .	BRIAN P. BUXTOI Signature, typed or printed name of registered age	N	E: Registered Ac	jent signature i	required when reinstating) DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TrīLE	SD	DELETE	1.1 TITLE		Change Addition	
NAME	ALMONY		1.2 NAM	E		
STHEFT ADDRESS	6542 RIVER RUN BLVD		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL		1.4 CITY	- ST-ZIP		
TITLE	P	DELETE	2 1 TITLE		V Addition	
NAME	Buppert, Irvin		22 NAM	Ε		
STREET ADDRESS	6612 RIVER RUN BLVD		23 STRE	ET ADDRESS		
CITY - ST - ZIP	SPRING HILL FL		2 4 City	- ST - ZIP		
IIILE	P	₹ DELETE	3.1 TITLE		P Change Addition	
NAME	SPALLINO, VINCENT		3 2 NAM		SWAUGER, LEROY	
STREET ADDRESS	6602 RIVER RUN BLVD.		3.3 STRE	ET ADDRESS	•	
DITY-ST-ZIP	SPRING HILL FL		3.4 CITY	- ST - ZIP	SPRING HILL, FL 34607	
TITLE	D	DELETE	4.1 TITLE		Change Addition	
JAME	ROGERS, STEPHEN J		4. 2 NAM	Ε		
SIREET ADDRESS	79 BRAMBACH RD		4.3 STRE	ET ADDRESS		
CITY - ST - ZiP	SCARSDALE NY		4.4 CITY	ST-ZIP		
TITLE	TD	DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME	SMOUSE, RAY		5 2 NAME			
STREET ADDRESS	6472 RIVER RUN BLVD.		53 STRE	ET ADDRESS		
CITY-S1-ZIP	SPRING HILL FL		5 4 CITY	ST-ZIP		
TITLE	D	DELETE	6 1 TITLE	-	☐ Change ☐ Addition	
NAME]	FIORE, RALPH		6.2 NAME			
STREET ADDRESS	6462 RIVER RUN BLVD.		6 3 STREE	T ADDRESS		
CITY-ST-ZIP	SPRING HILL FL		6.4 CITY	ST - ZIP		
 I do hereb cortife that 	by certify that the information supplied	with this filing is voluntarily furnis	hed and do	es not qua	alify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further	
oain, mai	t trie information indicated on this and I am an officer or director of the corp i Block 12 or Block 13 if changed, or	ioration or the receiver or trustee :	emoowered	rue and ac I to execut	courate and that my signature shall have the same legal effect as if made under the this report as required by Chapter 617, Florida Statutes; and that my name	

SIGNATURE: √

IGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFF

LEROY SWAUGER

12/1/86 /813/538-

CR2E037 (