

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90018 037 ****61.25

DOCUMENT # N07735

1. Entity Name

RIVER BEND MOBILE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

5330 GREEN KEY ROAD
 NEW PORT RICHEY FL 34652
 US

Mailing Address

C/O CAROL TRADER
 6407 CANE RUN DRIVE
 NEW PORT RICHEY FL 34652-9213
 US

2. Principal Place of Business

5330 Green Key Rd

Suite, Apt. #, etc.

3. Mailing Address

% MARIE L. WOLBERS

Suite, Apt. #, etc.

6416 PRESTON DR.

City & State

New Port Richey, FL

City & State

New Port Richey, FL

Zip

34652

Country

USA

Zip

34652

Country

USA

4. FEI Number

23-5222185

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

TRADER, CAROL
 6410 CANE RUN DR
 NEW PORT RICHEY FL 34652

7. Name and Address of New Registered Agent

Name

MARIE L. WOLBERS

Street Address (P.O. Box Number is Not Acceptable)

6416 PRESTON DR.

NEW PORT RICHEY

City

NEW PORT RICHEY

FL

Zip Code

34652

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: MARIE L. WOLBERS

Marie L. Wolbers

3-11-2002

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 P
 NAME COTE, ROBERT ☒ Delete
 STREET ADDRESS 6518 BRANDON DRIVE
 CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE VP
 NAME MONTSTATSOS, BARBARA ☐ Delete
 STREET ADDRESS 6520 CARLY DR
 CITY-ST-ZIP NEW-PT-RICHEY-FL 34652

TITLE S
 NAME WOLBERS, MARIE ☒ Delete
 STREET ADDRESS 6416 PRESTON DRIVE
 CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE T
 NAME TRADER, CAROL ☒ Delete
 STREET ADDRESS 6401 CANE RUN DRIVE
 CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE D
 NAME HOCUTT, MELBA ☒ Delete
 STREET ADDRESS 6344 PRESTON DR
 CITY-ST-ZIP NEW PT RICHEY FL 34652

TITLE D
 NAME GARWOLD, BESSIE ☐ Delete
 STREET ADDRESS 6505 CARLY DR
 CITY-ST-ZIP NEW PORT RICHEY FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Change ☐ Addition
 NAME WILLIAM J PELLAND
 STREET ADDRESS 6517 CARLY DR
 CITY-ST-ZIP NEW PORT RICHEY, FL 34652

TITLE VP ☐ Change ☐ Addition
 NAME SAME

TITLE S ☒ Change ☐ Addition
 NAME BEATRICE O. FITZGERALD
 STREET ADDRESS 6529 CARLY DR
 CITY-ST-ZIP NEW PORT RICHEY, FL 34652

TITLE T ☒ Change ☐ Addition
 NAME MARIE L. WOLBERS
 STREET ADDRESS 6416 PRESTON DR
 CITY-ST-ZIP NEW PORT RICHEY, FL 34652

TITLE D ☒ Change ☐ Addition
 NAME ALMA VANLENTE
 STREET ADDRESS 6415 PRESTON DR
 CITY-ST-ZIP NEW PORT RICHEY, FL 34652

TITLE D ☐ Change ☐ Addition
 NAME SAME

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: *Marie L. Wolbers* MARIE L. WOLBERS 3-11-2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

727-851371

CR2E037 (9/01)