2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2008 8:00 am
Secretary of State
04-14-2008 90070 020 ****66.25

DOCUMENT # N07735

1. Entity Name

RIVER BEND MOBILE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5330 GREEN KEY ROAD NEW PORT RICHEY FL 34652 US	6509 CARLY DR NEW PORT RICHEY FL 34652 US

1st MOORE CR2E037 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	6509 CARLY DR Suite, Apt. #, etc.
City & State	NEW PORT RICHEY FL City & State
Zip / Country	34652 / PASCO

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

LYONS, VICKIE
6509 CARLY DR
NEW PORT RICHEY FL 34652

7. Name and Address of New Registered Agent

Name: BRAND-TRESKON
Street Address (P.O. Box Number is Not Acceptable): 6418 CANE RUN DR.
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Brand Tull 3-29-08
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
Due By May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P COTE, NORMAN 6509 CARLY DR NEW PORT RICHEY FL 34652	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT LORRETA BROWN 6501 GRASTON DR NEW PORT RICHEY, FL 34652	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V CONKLIN, LES 6425 CANE RUN DR. NEW PT RICHEY FL 34652	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT BONNIE PAVLAT 6514 GRASTON DR NEW PORT RICHEY FL 34652	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S LYONS, VICKI 6509 CARLY DR. NEW PORT RICHEY FL 34652	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY MIRIAM BREWER 6424 PRESTON DR. NEW PORT RICHEY FL 34652	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T STROTH, RAYMOND 6426 CANE RUN DR. NEW PORT RICHEY FL 34652	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER BRAND TRESKON 6418 CANE RUN DR NEW PORT RICHEY FL 34652	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ALTERNATE ANN PARKS 6429 PRESTON DR NEW PORT RICHEY FL 34652	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Brand Tull