

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 04, 2006  
Secretary of State**

DOCUMENT# N28123

Entity Name: RIVER BRANCH ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

5145 TURTLE CK PL  
FT. PIERCE, FL 34981 US

**Current Mailing Address:**

**New Mailing Address:**

5145 TURTLE CK PL  
FT. PIERCE, FL 34981 US

FEI Number: 65-0160871      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

DAYTON, PAUL  
5145 TURTLE CREEK PLACE  
FT. PIERCE, FL 34981 US

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HOLLETT, GARY  
Address: 5145 WATER LILY WAY  
City-St-Zip: FT. PIERCE, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: VANZYL, PHILIP  
Address: 5148 WATERSIDE WAY  
City-St-Zip: FT. PIERCE, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: TREWN, TIMOTHY  
Address: 2208 RIVER BRANCH DR.  
City-St-Zip: FT. PIERCE, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Delete  
Name: DAYTON, PAUL  
Address: 5145 TURTLE CREEK PL  
City-St-Zip: FT PIERCE, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL DAYTON

D

04/04/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date