

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000000714 (6)

1. Corporation Name

RIVER PARK UTILITIES MANAGEMENT ASSOCIATION, INC



Principal Place of Business

**1208 COUNTY ROAD 309
CRESCENT CITY FL 32112**

Mailing Address

**P O BOX 426
WELAKA FL 32193**

3. Date Incorporated or Qualified
01/15/1992

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

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4. FLE Number
59-3108001

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HARPER, JAMES E
109 HAYES AVE.
RIVER PARK
CRESCENT CITY FL 32112**

81 Name
EBERT, ROBERT

82 Street Address (P.O. Box Number is Not Acceptable)
Star Rt. 2 Box 318

83 **118 Ludwig Ave.**

84 City **Crescent City** **FL** 85 Zip Code **32112**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Robert Ebert, President**

Robert Ebert

4/9/96

12. OFFICERS AND DIRECTORS

TITLE **PD** ☒ DELETE
NAME **HARPER, JAMES E**
STREET ADDRESS **STAR RT. 2 BOX 208E**
CITY-ST-ZIP **CRESCENT CITY FL 32112**

TITLE **VD** ☒ DELETE
NAME **AROLD, GEORGE W**
STREET ADDRESS **STAR RT. 2 BOX 147A**
CITY-ST-ZIP **CRESCENT CITY FL 32112**

TITLE **D** ☒ DELETE
NAME **MCMILLON, RALEIGH**
STREET ADDRESS **STAR RT 2 BOX 172**
CITY-ST-ZIP **CRESCENT CITY FL**

TITLE **DT** ☒ DELETE
NAME **MARTIN, ALLAN**
STREET ADDRESS **STAR RT 2 BOX 140AA**
CITY-ST-ZIP **CRESCENT CITY FL**

TITLE **D** ☐ DELETE
NAME **RAINS, GEORGE JACK**
STREET ADDRESS **STAR RT 22 BOX 149**
CITY-ST-ZIP **CRESCENT CITY FL**

TITLE **D** ☐ DELETE
NAME **PIDGION, MARY CATHERINE**
STREET ADDRESS **STAR ROUTE 2, BOX 380F**
CITY-ST-ZIP **CRESCENT CITY FL**

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS N 12

11 TITLE **PD** ☒ Change ☒ Addition
12 NAME **EBERT, ROBERT**
13 STREET ADDRESS **Star Rt. 2 Box 318**
14 CITY-ST-ZIP **Crescent City FL 32112**

21 TITLE **VD** ☒ Change ☒ Addition
22 NAME **EBERHARDT, HARRY**
23 STREET ADDRESS **P.O. Box 472 (119 Golf Course St.)**
24 CITY-ST-ZIP **Georgetown FL 32139**

31 TITLE **D** ☐ Change ☒ Addition
32 NAME **Walter C. Rozar**
33 STREET ADDRESS **P.O.Box 145 (204 Florida La.)**
34 CITY-ST-ZIP **Georgetown FL 32139**

41 TITLE **D** ☐ Change ☒ Addition
42 NAME **GODDARD, Juanita**
43 STREET ADDRESS **Star R. 2 Box 383B**
44 CITY-ST-ZIP **Crescent City FL 32112**

51 TITLE **S** ☐ Change ☒ Addition
52 NAME **JOHNSON, Jeanette S.**
53 STREET ADDRESS **Star Rt. 2 Box 138A**
54 CITY-ST-ZIP **Crescent City FL 32112**

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert Ebert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Robert Ebert, President

4/9/96

904-467-9113

CR2E037 (12/95)