2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002537

Apr 20, 2010 Secretary of State

Entity Name: RIVER MARSH AT PONTE VEDRA BEACH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1122 NECK RD 178 RIVER MARSH DRIVE

C/O PETER P LEGEZA JR

C/O JANE A SABO

PONTE VERRA PEACLE I

PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082

Current Mailing Address: New Mailing Address:

178 RIVER MASH DR178 RIVER MASH DRC/O PETER P. LEGEZA JRC/O JANE A SABO

PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082

FEI Number: 59-3572956 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:

BARTLETT, BARON L PERSONS, ROBERT B PA 50 NORTH A1A STE. 103 2215 SOUTH THIRD STREET

PONTE VEDRA BEACH, FL 32082 US SUITE 101
JACKSONVILLE BEACH, FL 32250 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: ROBERT B. PERSONS, JR. 04/20/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

Name: MEYNS, PAULA J MRS
Address: 112 RIVER MARSH DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D

Name: RANDLE, CARON W MRS
Address: 133 RIVER MARSH DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title:

Name: LLORT, ENID MRS
Address: 121 RIVER MARSH DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title:

Name: SABO, JANE A MRS
Address: 178 RIVER MARSH DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D

Name: JOHNSON, KIMBERLY G MRS
Address: 117 RIVER MARSH DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby 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 all other like empowered.

SIGNATURE: JANE SABO D 04/20/2010