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FILED

Feb 10 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 748842

(2)

1. Corporation Name

RIVERBEND ACRES PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

284 RIVERBEND RD.
ORMOND BEACH FL 32174284 RIVERBEND RD.
ORMOND BEACH FL 32174-6737

3. Date Incorporated or Qualified

09/10/1979

3a. Date of Last Report

02/19/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SYLVESTER, KATHY
284 RIVERBEND ROAD
ORMOND BCH FL 32174

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Kathy Sylvester

1-10-97

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD ☒ DELETE
NAME MICHAUD, VMAN
STREET ADDRESS 240 WHIPPORWILL LANE
CITY-ST-ZIP ORMOND BEACH FL1.1 TITLE Peter Brooker ☐ Change ☒ Addition
1.2 NAME 288 Wildwood Ln
1.3 STREET ADDRESS Ormond Beach FL 32174
1.4 CITY-ST-ZIPTITLE ~~SD~~ ☒ DELETE
NAME CLARIDA, VINCE *(Director only)*
STREET ADDRESS 252 RIVERBEND RD
CITY-ST-ZIP ORMOND BEACH FL *DIRECTOR ONLY SEE BELOW*2.1 TITLE David Tidwell ☐ Change ☒ Addition
2.2 NAME 233 Riverbend Rd.
2.3 STREET ADDRESS Ormond Bch, FL
2.4 CITY-ST-ZIPTITLE VD ☒ DELETE
NAME LEFEBER, YOLANDA
STREET ADDRESS 232 RIVERBEND ROAD
CITY-ST-ZIP ORMOND BEACH FL3.1 TITLE Elton Woodward ☐ Change ☒ Addition
3.2 NAME 216 Riverbend Dr.
3.3 STREET ADDRESS Ormond Beach FL 32174
3.4 CITY-ST-ZIPTITLE TD ☐ DELETE
NAME WHITAKER, DWIGHT
STREET ADDRESS 279 RIVERBEND ROAD
CITY-ST-ZIP ORMOND BEACH FL4.1 TITLE John Greaves ☐ Change ☒ Addition
4.2 NAME 292 Wildwood Ln.
4.3 STREET ADDRESS Ormond Bch, FL
4.4 CITY-ST-ZIPTITLE D *OK [unclear] DCW* ☒ DELETE
NAME CLARIDA, VINCE
STREET ADDRESS 252 RIVERBEND ROAD
CITY-ST-ZIP ORMOND BEACH FL5.1 TITLE Mildred Appel ☐ Change ☒ Addition
5.2 NAME 229 Riverbend Dr.
5.3 STREET ADDRESS Ormond Beach, FL 32174
5.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME MOODY, NITA
STREET ADDRESS 226 TREELINE ROAD
CITY-ST-ZIP ORMOND BEACH FL6.1 TITLE Vivian Michaud ☐ Change ☒ Addition
6.2 NAME 240 Whipporwill Lane
6.3 STREET ADDRESS Ormond Beach, FL
6.4 CITY-ST-ZIP

14. I do 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 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:

D. Whitaker *D. G. WHITAKER*

2/2/97 904-673-0509

CR2E037 (9/96)