

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 13, 2004  
Secretary of State**

DOCUMENT# N01000007599

Entity Name: ROBINSON HILLS COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

225 S WESTMONTE DRIVE  
SUITE 2050  
ALTAMONTE SPRINGS, FL 32714 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 161606  
ALTAMONTE SPRINGS, FL 327161606 US

**New Mailing Address:**

P O BOX 162147  
ALTAMONTE SPRINGS, FL 327162147 US

FEI Number: 59-3752194      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

PFAUSER, MARGO A  
225 SOUTH WESTMONTE DRIVE  
SUITE 2050  
ALTAMONTE SPRINGS, FL 32714 US

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

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:**

Title: PD ( ) Delete  
Name: SHUTTS, ROBERT T  
Address: 150 OXFORD ROAD, SUITE 140  
City-St-Zip: FERN PARK, FL 32730

Title: VPD ( ) Delete  
Name: ROBINSON, JOSEPH D IV  
Address: 150 OXFORD ROAD, SUITE 140  
City-St-Zip: FERN PARK, FL 32730

Title: STD ( ) Delete  
Name: RIDGWAY, JANET L  
Address: 150 OXFORD ROAD, SUITE 140  
City-St-Zip: FERN PARK, FL 32730

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

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

Title: VPD (X) Change ( ) Addition  
Name: GIBSON, THOMAS E  
Address: 7938 RIFFLE LANE  
City-St-Zip: ORLANDO, FL 32818

Title: STD (X) Change ( ) Addition  
Name: RIDGEWAY, JANET L  
Address: 150 OXFORD ROAD, SUITE 140  
City-St-Zip: FERN PARK, FL 32730

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT T SHUTTS

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

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04/13/2004

\_\_\_\_\_  
Date