

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26282

FILED  
Mar 21, 2005  
Secretary of State

**Entity Name:** RIVER CHASE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

2180 W. STATE RD. 434  
SUITE 5000  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

2180 W. STATE RD. 434  
SUITE 5000  
LONGWOOD, FL 32779

**New Mailing Address:**

**FEI Number:** 59-2999394

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HART, JAMES W JR  
SENTRY MANAGEMENT, INC.  
2180 W. SR 434, SUITE 5000  
LONGWOOD, FL 32779 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: JUNEAU, MARK  
Address: 245 RIVER CHASE DR  
City-St-Zip: ORLANDO, FL 32807

Title: VPD ( ) Delete  
Name: CRUZ, NANETTE  
Address: 324 RIVER CHASE DR  
City-St-Zip: ORLANDO, FL 32807

Title: D ( ) Delete  
Name: SAGORCHI, BASIL  
Address: 385 RIVER CHASE DR  
City-St-Zip: ORLANDO, FL 32807

Title: TD ( ) Delete  
Name: MCCARTNY, TIFFANEY  
Address: 361 RIVER CHASE DRIVE  
City-St-Zip: ORLANDO, FL 32807

Title: SD ( ) Delete  
Name: RAHMAN, ARIF  
Address: 137 RIVER CHASE DR  
City-St-Zip: ORLANDO, FL 32807

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

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

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

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

Title: TD (X) Change ( ) Addition  
Name: MCCARTHY, TIFFANEY  
Address: 361 RIVER CHASE DRIVE  
City-St-Zip: ORLANDO, FL 32807

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 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: MARK JUNEAU

PD

03/21/2005

Electronic Signature of Signing Officer or Director

Date