

**2006 NOT-FOR-PROFIT CORPORATION  
AMENDED ANNUAL REPORT**

**FILED**

06 JUL -5 PM 2:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



05302006 Chg-NP CR2E037 (4/06)

<b>DOCUMENT # N00000000156</b>					
1. Entity Name <b>HOMES OF RIVIERA DUNES HOMEOWNERS' ASSOCIATION, INC.</b>					
Principal Place of Business 2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 32779-5044			Mailing Address 2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 32779-5044		
2. Principal Place of Business <b>4301 32nd St W.</b>		3. Mailing Address <b>4301 32nd St W</b>			
Suite, Apt. #, etc. <b>Suite A20</b>		Suite, Apt. #, etc. <b>Suite A20</b>			
City & State <b>Bradenton, FLORIDA</b>		City & State <b>Bradenton, FLORIDA</b>		4. FEI Number <b>65-1065697</b>	
Zip <b>34205</b>		Country <b>MANATEE</b>		Applied For Not Applicable	
Zip <b>34205</b>		Country <b>MANATEE</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>HART, JAMES W JR SENTRY MANAGEMENT INC 2180 W SR 434 STE 5000 LONGWOOD, FL 32779-5044</b>			7. Name and Address of New Registered Agent Name <b>CTS Condominium management</b> Street Address (P.O. Box Number is Not Acceptable) <b>4301 32nd Street WEST SUITE A20</b> City <b>Bradenton</b> FL Zip Code <b>34205</b>		
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  DATE <b>5/31/06</b> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
<b>Amended AR is \$61.25</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LINDALEE, ANDERSON 310 10TH AVE E PALMETTO, FL 34221 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	300077174053 07/10/06--01004--014 **\$61.25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GAULIEN, COBY 610 RIVIERA DUNES WAY, #503 PALMETTO, FL 34221 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CASTELLI, CHARLES 203 12TH AVE E PALMETTO, FL 34221 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROMAK, THOMAS 208 12TH AVE E PALMETTO, FL 34221 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Gillis, Patricia 908 RIVIERA DUNES WAY Palmetto FL 34221 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TULLOS, COSPER 305 11TH AVE E PALMETTO, FL 34221 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROMAK, MARY BETH 208 12th Ave E Palmetto, FL 34221 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JC 7/6 <input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.  SIGNATURE:  DATE <b>5/31/06</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #					



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 9, 2006

HOMES OF RIVIERA DUNES HOMEOWNERS' ASSOCIATION, INC.  
4301 32ND ST W  
SUITE A20  
BRADENTON, FL 34205

SUBJECT: HOMES OF RIVIERA DUNES HOMEOWNERS' ASSOCIATION,  
INC.  
Ref. Number: N00000000166

Please be advised, we have received your request to file an amended annual report for the above corporation; however, the document **has not been filed** and is being returned for the following:

The filing fee for an amended annual report is \$61.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Sean Toner  
Senior Section Administrator

Letter Number: 906A00039749

Date 6/20/06 Fee 61.25  
Chk# 115 Prep AA6  
CAM [Signature] Director  
Date Received \_\_\_\_\_

