

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 713675

**FILED**  
**Jan 10, 2018**  
**Secretary of State**  
**CC1913147718**

**Entity Name:** RIVER PARK CIVIC CENTER, INC.

**Current Principal Place of Business:**

140 VIRGINIA STREET  
0001  
CRESCENT CITY, FL 32112

**Current Mailing Address:**

103 SOUTH AVENUE  
CRESCENT CITY, FL 32112 US

**FEI Number: 59-1707512**

**Certificate of Status Desired: No**

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

KIENHOLZ, LINDA O  
103 SOUTH AVENUE  
CRESCENT CITY, FL 32112 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title T  
Name HOOVER, DIANA  
Address 123 CAROLINA STREET  
City-State-Zip: CRESCENT CITY FL 32112

Title VP  
Name PROCTOR, CARL  
Address 273 OLD HIGHWAY 17  
City-State-Zip: CRESCENT CITY FL 32112

Title P  
Name SIMMONS, MELODY  
Address 140 FLORIDA ST  
City-State-Zip: CRESCENT CITY FL 32112

Title S  
Name KIENHOLZ, LINDA  
Address 103 SOUTH AVENUE  
City-State-Zip: CRESCENT CITY FL 32112

Title D  
Name CRISSWELL, KAREN  
Address 147 RIVER TEE DR  
City-State-Zip: CRESCENT CITY FL 32112

Title D  
Name MARTIN, SHIRLEY  
Address 116 IOWA ST  
City-State-Zip: CRESCENT CITY FL 32112

Title D  
Name NASH, STEVE  
Address 101 IOWA STREET  
City-State-Zip: CRESCENT CITY FL 32112

*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: LINDA KIENHOLZ**

**SECRETARY**

**01/10/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date