2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743199

Entity Name: RIVERS EDGE HOME OWNERS ASSOCIATION, INC.

FILED
Jan 22, 2017
Secretary of State
CC0672205622

Date

Date

Current Principal Place of Business:

313 POMPANO DR

MELBOURNE BEACH, FL 32951

Current Mailing Address:

P O BOX 510462

MELBOURNE BEACH. FL 32951

FEI Number: 59-2381003 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVERS EDGE HOMEOWNERS ASSOCIATION 313 POMPANO DR MELBOURNE BEACH, FL 32951 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: CHARLES D. WESTERFIELD 01/22/2017

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR

Name SEIVERTH, RONALD Name WESTERFIELD, CHARLES

Address 313 POMPANO DR Address 283 MARLIN PLACE

City-State-Zip: MELBOURNE BEACH FL 32951 City-State-Zip: MELBOURNE BEACH FL 32951

TitleTREASURERTitleSECRETARYNameMARKS, JAMIENameMILLS, THOMASAddress313 AMBERJACK PLACEAddress290 POMPANO DR

City-State-Zip: MELBOURNE BEACH FL 32951 City-State-Zip: MELBOURNE BEACH FL 32951

Title VP Title DIRECTOR

NameZABINKSI, STACEYNameHERNANDEZ, GABRIELAddress2240 S RIVER RDAddress250 POMPANO DR

City-State-Zip: MELBOURNE BEACH FL 32951 City-State-Zip: MELBOURNE BEACH FL 32951

Title DIRECTOR
Name FAY, ROBERT

Address 373 AMBERJACK PLACE

City-State-Zip: MEBOURNE BEACH FL 32951

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: JAMIE MARKS TREASURER 01/22/2017

Electronic Signature of Signing Officer/Director Detail