### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 743199** 

Entity Name: RIVERS EDGE HOME OWNERS ASSOCIATION, INC.

FILED
Apr 02, 2023
Secretary of State
4863141348CC

# **Current Principal Place of Business:**

373 AMBERJACK PLACE 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 363 MARLIN PLACE 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 04/02/2023

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

TitleSECRETARYTitleDIRECTORNameWESTERFIELD, CHARLESNameMILLS, THOMASAddress283 MARLIN PLACEAddress290 POMPANO DR

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

TitleDIRECTORTitlePRESIDENTNameHIRTER, SARANameFAY, ROBERT

Address 353 AMBERJACK PLACE Address 373 AMBERJACK PLACE

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

Title VP Title TREASURER

Name DOTY, JAMES Name WINKLER, SUSAN

Address 303 POMPANO DRIVE Address 363 MARLIN PLACE

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

Title DIRECTOR
Name WITT, CINDY

Address 320 AMBERJACK PLACE

City-State-Zip: MELBOURNE 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: SUSAN WINKLER TREASURER 04/02/2023