2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743199

Entity Name: RIVERS EDGE HOME OWNERS ASSOCIATION, INC.

FILED
Jan 17, 2014
Secretary of State
CC7572844254

Date

Date

Current Principal Place of Business:

340 AMBERJACK PL

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:

GARY L. ROBINSON 340 AMBERJACK PL 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:

Electronic Signature of Registered Agent

Officer/Director Detail:

Title S Title VP

NamePATERNOSTER, JUDYNameLOGLISCI, VINCEAddress2245 SOUTH RIVER ROADAddress340 MARLIN PL

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

Title D Title D

NameCOOPER, MINTONNameSEIVERTH, RONALDAddress290 MARLIN PLAddress313 POMPANO PL

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

Title P Title D

NameKIRWIN, WILLIAMNameRYBICKI, GEORGEAddress320 AMBERJACK PLAddress350 ALBACORE PL

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

Title TREASURER

Name ROBINSON, GARY L Address 340 AMBERJACK PL

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: GARY L. ROBINSON TREASURER 01/17/2014