

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 751466

**FILED  
Mar 27, 2017  
Secretary of State  
CC7163398446**

**Entity Name:** THE RIVER RIDGE HOME OWNERS ASSOCIATION OF MARTIN COUNTY, INC.

**Current Principal Place of Business:**

18600 COUNTY LINE ROAD  
TEQUESTA, FL 33469

**Current Mailing Address:**

18600 COUNTY LINE ROAD  
TEQUESTA, FL 33469 US

**FEI Number: 65-0042585**

**Certificate of Status Desired: No**

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

HILLEY & WYANT-CORTEZ, PA  
840 US HIGHWAY 1 - SUITE 345  
NORTH PALM BEACH, FL 33408-3834 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 SD  
Name SLINKMAN, LAURA  
Address 18257 SE RIDGEVIEW DR  
City-State-Zip: TEQUESTA FL 33469

Title DP  
Name SCOVILLE, DONA  
Address 18257 SE RIDGEVIEW DR.  
City-State-Zip: TEQUESTA FL 33469

Title VP  
Name EATON, VIVIAN  
Address 18257 SE RIDGEVIEW DR  
City-State-Zip: TEQUESTA FL 33469

Title TREASURER  
Name PAPI, PAT  
Address 18257 SE RIDGEVIEW DRIVE  
City-State-Zip: TEQUESTA FL 33469

Title D  
Name ROSICA, TOM  
Address 18257 SE RIDGEVIEW DRIVE  
City-State-Zip: TEQUESTA FL 33469

Title DIRECTOR  
Name VELARDO, VINCE  
Address 18600 COUNTY LINE ROAD  
City-State-Zip: TEQUESTA FL 33469

Title DIRECTOR  
Name AVERETT, JANELL  
Address 18600 COUNTY LINE ROAD  
City-State-Zip: TEQUESTA FL 33469

*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: DONA SCOVILLE**

**PRESIDENT**

**03/27/2017**

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

\_\_\_\_\_  
Date