

**2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N00000000238

**Entity Name:** RIVIERA DUNES OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

16684 PERDIDO KEY DRIVE  
PENSACOLA, FL 32507

**Current Mailing Address:**

P.O. BOX 34426  
PENSACOLA, FL 32507 US

**FEI Number:** 59-3632229

**Certificate of Status Desired:** No

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

PERDIDO SAND REALTY, INC.  
5615 BAUER ROAD  
PENSACOLA, FL 32507 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 VP  
Name SCELFO, NANCY  
Address 1220 MALLARD CIR  
City-State-Zip: BOGART GA 30622

Title PRESIDENT  
Name WOLFE, JOHN  
Address P.O. BOX 36953  
City-State-Zip: BIRMINGHAM AL 35236

Title SECRETARY  
Name MURDOCK, MARGIE  
Address 16684 PERDIDO KEY DR  
#304  
City-State-Zip: PENSACOLA FL 32507

Title DIRECTOR  
Name OSBORNE, MEGAN  
Address 16685 PERDIDO KEY DR.  
#301  
City-State-Zip: PENSACOLA FL 32507

Title TREASURER  
Name WINSTEAD, JIM  
Address 3052 ROSA DEL VILLA  
City-State-Zip: GULF BREEZE FL 32563

*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:** JOHN WOLFE

**PRESIDENT**

**03/27/2013**

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

\_\_\_\_\_ Date