

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

**Feb 07, 2024**

**Secretary of State  
9865103627CC**

DOCUMENT# N00000000867

**Entity Name:** RIO CIVIC CLUB, INC.

**Current Principal Place of Business:**

1255 N.E. DIXIE HWY  
RIO, JENSEN BEACH, FL 34957

**Current Mailing Address:**

P O BOX 2  
JENSEN BEACH, FL 34958 US

**FEI Number: 65-1052162**

**Certificate of Status Desired: No**

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

PREAST, JULIE  
538 N.E. ALICE STREET, RIO  
JENSEN BEACH, FL 34957 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            PRESIDENT  
Name            JENSEN, JOLYNNE  
Address        1105 NE IXORA DRIVE  
City-State-Zip: JENSEN BEACH FL 34957

Title            DIRECTOR  
Name            SCHOEN, LINDA  
Address        1375 NE DIXIE HIGHWAY, #43  
City-State-Zip: JENSEN BEACH FL 34957

Title            SECRETARY, TREASURER  
Name            PREAST, JULIE  
Address        538 NE ALICE ST  
City-State-Zip: JENSEN BEACH FL 34957

Title            VP  
Name            ROBBINS, JACK  
Address        1236 NE 14TH COURT  
                    M-7  
City-State-Zip: JENSEN BEACH FL 34957

Title            DIRECTOR  
Name            MARTEL, HANNAH  
Address        60 NW ALICE STREET  
City-State-Zip: JENSEN BEACH FL 34957

Title            DIRECTOR  
Name            WEISS, NANCY  
Address        3940 NE SUGARHILL AVENUE  
City-State-Zip: JENSEN BEACH FL 34957

Title            DIRECTOR  
Name            BRUNELLE, PAM  
Address        1664 NE ARCH AVE.  
City-State-Zip: JENSEN BEACH FL 34957

Title            DIRECTOR  
Name            DIEDE, LINETTE  
Address        1330 NE 14 COURT  
                    K-22  
City-State-Zip: JENSEN BEACH FL 34957

**Continues on page 2**

*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: JULIE PREAST**

**SECRETARY/TREASURER 02/07/2024**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           NATION, HARVEY  
Address        1654 NE SILVIA AVENUE  
City-State-Zip: JENSEN BEACH FL 34957