## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005444

Entity Name: RIVERSIDE OWNERS ASSOCIATION, INC.

**FILED** Mar 20, 2019 **Secretary of State** 8125756746CC

## **Current Principal Place of Business:**

12058 SAN JOSE BLVD. SUITE 904

JACKSONVILLE, FL 32223

## **Current Mailing Address:**

P.O. BOX 600033

JACKSONVILLE, FL 32260

FEI Number: 03-0521054 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PROPERTY MANAGEMENT PARTNERS & ASSOCIATES, INC. 12058 SAN JOSE BLVD. SUITE 904

JACKSONVILLE, FL 32223 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: ELAINE BROOKS 03/20/2019

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **PRESIDENT** Title DIRECTOR

SMITH, MIDGE LEBLANC, PATRICIA Name Name P.O. BOX 600033 P.O. BOX 600033 Address Address

City-State-Zip: JACKSONVILLE FL 32260 City-State-Zip: JACKSONVILLE FL 32260

Title VΡ Title SECRETARY/TREASURER

Name SAPUTO, JOHN Name SIMPO, DETRA Address P.O. BOX 600033 P.O. BOX 600033 Address

City-State-Zip: JACKSONVILLE FL 32260 City-State-Zip: JACKSONVILLE FL 32260

Title **DIRECTOR** 

Name FARLEY, JEANNE Address P.O. BOX 600033

JACKSONVILLE FL 32260 City-State-Zip:

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.

03/20/2019 SIGNATURE: MIDGE SMITH **PRESIDENT**