## 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.

PRESIDENT

SIGNATURE: CHARLES JOHNSTON

Electronic Signature of Signing Officer/Director Detail

# FEI Number: 20-5273136

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

AGI REGISTERED AGENTS, INC 1000 BRICKELL AVE SUITE 300 MIAMI, FL 33131 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	VD	Title	PD
	Name	COLEMAN, TRACY	Name	JOHNSTON, CHARLES
	Address	4238 LAKESIDE DR., #102	Address	4238 LAKESIDE DR., #202
	City-State-Zip:	JACKSONVILLE FL 32210	City-State-Zip:	JACKSONVILLE FL 32210
	Title	SD		
	Title Name	SD BEBOUT, MARY		
	Name	BEBOUT, MARY		

#### Certificate of Status Desired: Yes

Date

#### 01/11/2017

Date

#### FILED Jan 11, 2017 Secretary of State CC4809879342

Entity Name: THE RIVER HOMES AT ORTEGA CONDOMINIUM ASSOCIATION, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

4234 LAKESIDE DR JACKSONVILLE, FL 32210

DOCUMENT# N0500006948

### **Current Mailing Address:**

4234 LAKESIDE DR JACKSONVILLE, FL 32210