### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005291

Entity Name: RIVER RANCH RETREAT HOMEONWERS ASSOCIATION, INC.

**FILED** Apr 15, 2017 **Secretary of State** CC3987056644

# **Current Principal Place of Business:**

3940 OKCHIA CIR. VERNON, FL 32462

# **Current Mailing Address:**

**PO BOX 184** 

VERNON, FL 32462

FEI Number: 26-4840304 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

MANUEL, JOHN F 2004 HWY 79 BONIFAY, FL 32425 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:

Title

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

**PRESIDENT** 

Title	D.	Title	SEC./TREAS.
Name	MANUEL, JOHN F	Name	FINCH, BELINDA
Address	2004 N HWY 79	Address	PO BOX 184
City-State-Zip:	BONIFAY FL 32425	City-State-Zip:	VERNON FL 32462

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Name HOOD, CHRIS Name CANNON, JIM

Address 3931 OKCHIA CIRCLE Address P.O. BOX 9610

VERNON FL 32462 City-State-Zip: PANAMA CITY BEACH FL 32417 City-State-Zip:

Title Title D.

Name EBERHARDT, SUSAN Name CARROLL, LELON

Address PO BOX 27695 3895 RIVER RANCH ROAD Address

City-State-Zip: PANAMA CITY BEACH FL 32411 City-State-Zip: VERNON FL 32462

Title

Title DIRECTOR Title D.

Name POWELL, RANDALL CONNOR, ROGER Name 3878 OKCHIA CIRCLE Address Address PO BOX 392 City-State-Zip: VERNON FL 32462 VERNON FL 32462 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.

04/15/2017 SIGNATURE: BELINDA FINCH SEC./TREAS.