

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20865

Entity Name: RIO VILLA HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**137 S. COURTENAY PKWY
683
MERRITT ISLAND, FL 32952**Current Mailing Address:**137 S. COURTENAY PKWY
683
MERRITT ISLAND, FL 32952**FEI Number:** 59-2881194**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TCB PROPERTY MANAGEMENT
137 S. COURTENAY PKWY
683
MERRITT ISLAND, FL 32952 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	DIRECTOR
Name	HALGOPIAN, AL
Address	137 S. COURTENAY PKWY #683
City-State-Zip:	MERRITT ISLAND FL 32952

Title	TD
Name	DRAWS, JUDY
Address	3098 RIO BONITA ST
City-State-Zip:	INDIALANTIC FL 32903

Title	VP
Name	MORRIS, JAMES
Address	538 RIO CASA DR N
City-State-Zip:	INDIALANTIC FL 32903

Title	D
Name	MINNIX, TY
Address	3067 RIO PALMA N.
City-State-Zip:	INDIALANTIC FL 32903

Title	PRESIDENT
Name	PULVINO, JOE
Address	3078 RIO BAYA
City-State-Zip:	INDIALANTIC FL 32903

Title	VP
Name	DONOVAN, KIMBERLY
Address	447 RIO CASA DR N
City-State-Zip:	INDIALANTIC FL 32903

Title	DIRECTOR
Name	SNIPES, CECIL
Address	540 RIO PINO N
City-State-Zip:	INDIALANTIC FL 32903

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: JOE PULVINO

PD

01/08/2020

Electronic Signature of Signing Officer/Director Detail_____
Date