

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30554

FILED
May 20, 2020
Secretary of State
8688437887CC**Entity Name:** THE HOMES AT RIVERBEND HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**8751 W BROWARD BLVD
SUITE 400
PLANTATION, FL 33324**Current Mailing Address:**PO BOX 19439
PLANTATION, FL 33318 US**FEI Number: 65-0122577****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WINTERS & WINTERS, P.A.
1501 SW 2ND AVE
BOCA RATON, FL 33437 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 DIR/PRES
Name DELGADO, MANNY J
Address 373 W. RIVERBEND DRIVE
City-State-Zip: SUNRISE FL 33326Title DIR
Name CRAMER, DIANE
Address 267 E RIVERBEND DRIVE
City-State-Zip: SUNRISE FL 33326Title DIR
Name KRAMER, ANDREW I
Address 233 W. RIVERBEND DRIVE
City-State-Zip: SUNRISE FL 33326Title DIR, VP
Name CORTEZ, ERNESTO
Address 275 E RIVERBEND DRIVE
City-State-Zip: SUNRISE FL 33326Title DIR, TREASURER
Name JENDRY, EDWARD
Address 310 E RIVERBEND DRIVE
City-State-Zip: SUNRISE FL 33326Title DIR
Name ERNST, JASON
Address 352 S KETCH DRIVE
City-State-Zip: SUNRISE FL 33326Title DIRECTOR, SECRETARY
Name JAMES, MICHELLE
Address 373 W RIVERBEND DR
City-State-Zip: SUNRISE FL 33326

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: DELGADO , MANNY J**PRESIDENT****05/20/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date