

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35673

**Entity Name:** RIVER OAKS EAST HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC3216866494**

**Current Principal Place of Business:**

PHILIP E. SHEETS  
10364 N. NATCHEZ LOOP  
DUNNELLON, FL 34434

**Current Mailing Address:**

PHILIP E. SHEETS  
10364 N. NATCHEZ LOOP  
DUNNELLON, FL 34434

**FEI Number: 59-3086423**

**Certificate of Status Desired: No**

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

SHEETS, PHILIP E  
10364 N. NATCHEZ LOOP  
DUNNELLON, FL 34434 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 SECRETAY, DIRECTOR  
Name SHEETS, CHERYL C  
Address 10364 N NATCHEZ LOOP  
City-State-Zip: DUNNELLON FL 34434

Title PRESIDENT, DIRECTOR  
Name DANKER, JOHN W  
Address 2230 E. SHOSHONI COURT  
City-State-Zip: DUNNELLON FL 34434

Title VP, DIRECTOR  
Name WATSON, TERRIE  
Address 2175 E. SHOSHONI COURT  
City-State-Zip: DUNNELLON FL 34434

Title DIRECTOR  
Name NOTTINGHAM, JULIE  
Address 10459 N NATCHEZ LOOP  
City-State-Zip: DUNNELLON FL 34434

Title TREASURER, DIRECTOR  
Name KATHERMAN, MARILYN  
Address 10409 N NATCHEZ LOOP  
City-State-Zip: DUNNELLON FL 34434

*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: CHERYL C. SHEETS**

**SECRETARY**

**02/23/2015**

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date