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.

TREASURER

The	D	The	
Name	MAIZ, ARMANDO	Name	SHEFFIELD, SALLY
Address	525 RIVER MOORINGS DR	Address	565 RIVER MOORINGS DR.
City-State-Zip:	MERRITT ISLAND FL 32953	City-State-Zip:	MERRITT ISLAND FL 32953
Title	SD	Title	Р
Name	FERRANDO, VINCENT	Name	VAYDA, JEFF
Address	475 RIVER MOORINGS DR.	Address	640 RIVER MOORINGS DR.
City-State-Zip:	MERRITT ISLAND FL 32953	City-State-Zip:	MERRITT ISLAND FL 32953

		Electronic Signature of Registered Agent						
	Officer/Director Detail :							
	Title	D	Title	TD				
	Name	MAIZ, ARMANDO	Name	SHEFFIELD, SALLY				
	Address	525 RIVER MOORINGS DR	Address	565 RIVER MOORINGS DR.				
	City-State-Zip:	MERRITT ISLAND FL 32953	City-State-Zip:	MERRITT ISLAND FL 32953				
			T '(1)	P				
	Title	SD	Title	Р				
	Name	FERRANDO, VINCENT	Name	VAYDA, JEFF				
			A al al una a a					

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.

Name and Address of Current Registered Agent:

GOLDMAN, MITCHELL S 96 WILLARD ST.

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004950

Entity Name: RIVER MOORINGS OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

640 RIVER MOORINGS DR. MERRITT ISLAND, FL 32953

Current Mailing Address:

P.O. BOX 540426 MERRITT ISLAND, FL 32954-0426

FEI Number: 59-3460156

SUITE 302 COCOA, FL 32922 US

SIGNATURE:

FILED Feb 09, 2014 Secretary of State CC4536423091

Date

Certificate of Status Desired: No

Date

02/09/2014

Electronic Signature of Signing Officer/Director Detail