2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707298

FILED Jan 22, 2011 Secretary of State

Entity Name: RIVER PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P. O. BOX 8122 PORT LUCIE, FL 34985

Current Mailing Address: New Mailing Address:

P. O. BOX 8122 PORT LUCIE, FL 34985

FEI Number: 59-6146941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GOMEZ, SEBASTIAN

225 E. ARBOR AVE.

PORT SAINT LUCIE, FL 34952 US

BRUNNER, SARAH

490 E. PRIMA VISTA BLVD.

PORT SAINT LUCIE, FL 34983 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: SARAH BRUNNER 01/22/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: BRUNNER, SARAH
Address: 490 E. PRIMA VISTA BLVD.
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: SD

Name: CROGHAN, SHEILA Address: 150 RIO MAR DRIVE

City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: TD

Name: CROGHAN, SHEILA Address: 150 RIO MAR DRIVE

City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: FVPD

Name: IVINS, KATHLEEN

Address: 160 SE FLORESTA DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: SVPD

 Name:
 MARTINEZ, JOSEFINA

 Address:
 1517 SW URBINO AVE.

 City-St-Zip:
 PORT SAINT LUCIE, FL 34953

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: SARAH BRUNNER PD 01/22/2011