

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90132 014 ****61.25

DOCUMENT # 708737

1. Entity Name

RIVER FOREST COMMUNITY ASSOCIATION, INC.



Principal Place of Business

**13506 ISLAND ROAD, S.E.
FORT MYERS FL 33905**

Mailing Address

**13506 ISLAND ROAD, S.E.
FORT MYERS FL 33905**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-6175994**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WEST, WILLIAM
13887 RIVER FOREST DR.
FT. MYERS FL 33905**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
P/D	WEST, WILLIAM	13887 RIVER FOREST DR.	FT. MYERS FL 33905	☐ Delete			
VP/D	FANELLE, JOSEPH	13849 SLEEPY HOLLOW LANE	FORT MYERS FL 33905	☐ Delete			
T	PRITCHARD, DOUGLAS	13509 ISLAND RD	FORT MYERS FL 33905	☐ Delete			
D	RIDGELEY, BRENDA	13539 ISLAND RD	FT. MYERS FL 33905	☒ Delete	D/S	DELIGHT K. WEST	13887 RIVER FOREST DR. FT. MYERS FL 33905
D	VENEMA, BARBARA	13731 OXBOW RD.	FORT MYERS FL 33905	☐ Delete			
				☐ Delete			

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] PRITCHARD, TREAS. 1/11/03 (239) 690-0543