

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90090 029 ****70.00

DOCUMENT # 710362

1. Entity Name

RIVERDALE PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business

3204 CEDLEY RD
DADE CITY FL 33523
US

Mailing Address

3204 CEDLEY RD
DADE CITY FL 33523
US

2. Principal Place of Business

3208 PATSBURG PLACE

Suite, Apt. #, etc.

3. Mailing Address

Same as #2

Suite, Apt. #, etc.

City & State

DADE CITY, FL

Zip
33523

Country
USA

City & State

Zip

Country

4. FEI Number

59-2364162

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required



MOORE

CR2E037 (11/03)

6. Name and Address of Current Registered Agent

SMITH, MADELINE C
3204 CEDLEY RD
DADE CITY FL 33523

7. Name and Address of New Registered Agent

Name LORRIE E. DEETER

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

3208 PATSBURG PLACE

City DADE CITY

FL

Zip Code
33523

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

LORRIE E. DEETER

LORRIE E DEETER, PRESIDENT 4/1/04

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
Due By May 1, 2004

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

TITLE P
NAME MESSER, LIB ☒ Delete
STREET ADDRESS 33160 PATRICE ROAD
CITY-ST-ZIP DADE CITY FL 33523

TITLE ST
NAME SMITH, MADELINE ☒ Delete
STREET ADDRESS 3204 CEDLEY ROAD
CITY-ST-ZIP DADE CITY FL 33523

TITLE D
NAME STAFFORD, TYRONE ☐ Delete
STREET ADDRESS 3507 RIVERDALE DRIVE
CITY-ST-ZIP DADE CITY FL 33523

TITLE V
NAME MESSER, RICK ☐ Delete
STREET ADDRESS 33160 PATRICE ROAD
CITY-ST-ZIP DADE CITY FL 33523

TITLE D
NAME PRIESTEN, CAROL E ☒ Delete
STREET ADDRESS 33146 AMETTE RD
CITY-ST-ZIP DADE CITY FL 33526

TITLE D
NAME CRABTREE, MARGE ROBERT ☐ Delete
STREET ADDRESS 33137 CERCELIA ROAD
CITY-ST-ZIP DADE CITY FL 33523

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE LORRIE DEETER, P ☐ Change ☒ Addition
NAME 3208 PATSBURG PLACE
STREET ADDRESS DADE CITY, FL 33523
CITY-ST-ZIP

TITLE SECRETARY/TREASURER ☐ Change ☒ Addition
NAME DAVID SEIP
STREET ADDRESS DADE CITY, FL 33523
CITY-ST-ZIP

TITLE VICE-PRESIDENT ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MONA STAFFORD, D ☐ Change ☒ Addition
NAME 3507 RIVERDALE DRIVE
STREET ADDRESS DADE CITY, FL 33523
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME LYNNE BOGOSTA
STREET ADDRESS 3506 RIVERDALE DRIVE
CITY-ST-ZIP DADE CITY, FL 33523

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

LORRIE E. DEETER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/04

Date

(352) 583-5120

Daytime Phone #