

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2004 8:00 am
Secretary of State

02-20-2004 90016 038 ****61.25

DOCUMENT # 715001 1. Entity Name RIVER OAKS COMMUNITY ASSOCIATION, INC.	
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Principal Place of Business 5205 S ORANGE AVENUE ORLANDO, FL 32809	Mailing Address 5205 S ORANGE AVENUE ORLANDO, FL 32809
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94018613



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02172004 Chg-NP CR2E037 (10/03)

4. FEI Number 59-2030685	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
MOLETTEIRE, FRANK 5145 THE OAKS CR ORLANDO, FL 32809	

7. Name and Address of New Registered Agent	
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
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Filing Fee is \$61.25 Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHROSTAKOS, DANA 476 HARBOUR ISLAND RD ORLANDO, FL 32809 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEAFFER, CAROL 5101 THE OAKS CIRCLE ORLANDO, FL 32809 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S COPELY, BRENDA 5109 THE OAKS CR ORLANDO, FL 32809 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SUMMER, FORREST 412 HARBOUR ISLAND RD ORLANDO, FL 32809 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COPELY, DICK 5109 THE OAKS CR ORLANDO, FL 32809 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOCCIO, REBECCA 460 HARBOUR IS RD ORLANDO, FL 32809 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Robin Hewlett 5145 The Oaks Cr. Orlando, FL 32809 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Mose Javier 5092 Lecward Way Orlando, FL 32809 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec. Stacey Haley 504 The Oaks Cr. Orlando, FL 32809 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dir. Roxanna Sigler 504 The Oaks Cr. Orl. FL 32809 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dir. Frank Molletteire 5145 The Oaks Cr. Orl. FL 32809 ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: <i>Brenda C. Copley</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	02-17-04 Date	407-872-1387 Daytime Phone #
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