

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2008 8:00 am
Secretary of State

02-22-2008 90020 027 ****61.25

DOCUMENT # 723339

1. Entity Name

RIVER VISTA CONDOMINIUM ASSOCIATION, INC



Principal Place of Business

1950 NE INDIAN RIVER DR
JENSEN BEACH FL 34957
US

Mailing Address

1950 NE INDIAN RIVER DR
JENSEN BEACH FL 34957
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

PO BOX 111

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

JENSEN BEACH, FL

Zip

Country

Zip

Country

34958

USA

4. FEI Number

59-1478463

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

JAKAB, JOSEPH J
666 NE DIXIE HWY
JENSEN BEACH FL 34957

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 re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

CK #1709

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME RYAN, DOLORES
STREET ADDRESS 1950 NE INDIAN RIVER DR #304
CITY-ST-ZIP JENSEN BEACH FL 34957

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

TITLE P ☐ Delete
NAME RINGO, JAMES
STREET ADDRESS 1950 NE INDIAN RIVER DR #303
CITY-ST-ZIP JENSEN BEACH FL 34957

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

TITLE D ☐ Delete
NAME MACCARONE, FRED
STREET ADDRESS 1950 NE INDIAN RIVER DR
CITY-ST-ZIP JENSEN BEACH FL 34957

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

TITLE V ☐ Delete
NAME PLAVCHAK, ANN
STREET ADDRESS 1950 NE INDIAN RIVER DR #203
CITY-ST-ZIP JENSEN BEACH FL 34957

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

TITLE TD ☐ Delete
NAME GORHAM, EILEEN
STREET ADDRESS 1950 NE INDIAN RIVER DR # 301
CITY-ST-ZIP JENSEN BEACH FL 34957

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

TITLE VD ☐ Delete
NAME POMFREY, DONALD
STREET ADDRESS 1950 NE INDIAN RIVER DR #105
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE SD ☒ Change ☐ Addition
NAME PEAK, HELEN
STREET ADDRESS 1950 NE INDIAN RIVER DR #205
CITY-ST-ZIP JENSEN BEACH, FL 34957

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

2/12/08 772-225-5058