

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90425 016 ****61.25

DOCUMENT # 729998		
1. Entity Name R.B. CONDOMINIUM ASSOCIATION, INC.		

Principal Place of Business RIVER BEND RD. PO BOX 190 WELAKA FL 32193-7190	Mailing Address RIVER BEND RD. PO BOX 190 WELAKA FL 32193-7190
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/05)

4. FEI Number 23-7429472	Applied For ☐ Not Applicable
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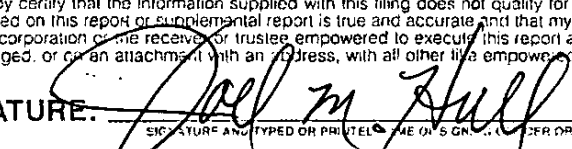
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent RECHTIN, CHRISTOPHER 179 BEECHERS POINT WELAKA FL 32193		7. Name and Address of New Registered Agent Name Hull, Joe Street Address (P O Box Number is Not Acceptable) 113 Latasha Terrace City Palatka , FL Zip Code 32177	
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8. I, the undersigned, submit 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	
SIGNATURE 	DATE 4/10/06

FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HULL, JOE 113 LATASHA TERRACE PALATKA FL 32177 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P-D Hull, Joe 113 Latasha Terrace Palatka Fl 32177 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COX, GARY 11639 LOIS CROSS JACKSONVILLE FL 32259 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S-T-D Brinson, Elaine 246 Goodtown Dr Brunswick, Ga 31525 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD COX, STAN 1480 TAMA RAN PLACE JACKSONVILLE FL 32259 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	M Smith, Louise P.O. Box 574 SanMateo, Fl 32187 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M RECHTIN, CHRISTOPHER 179 BEECHERS POINT DR WELAKA FL 32193 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	M Douglas, Taylor 105 Shady Oak Lane Palatka, Fl 32177 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M HALL, HOWARD P.O. BOX 219 WELAKA FL 32193 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 	DATE 4/10/06