

FILED
Jun 26, 2003 8:00 am
Secretary of State

06-26-2003 90039 003 *****61.25

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

DOCUMENT # 741433		
1. Entity Name RIVER RUN HOMEOWNER'S ASSOCIATION, INC.		
Principal Place of Business 907 WHITEWATER CT ALTAMONTE SPRINGS, FL 32714		Mailing Address 907 WHITEWATER CT 913 GREAT BEND ROAD ALTAMONTE SPRINGS, FL 32714
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.
City & State		City & State
Zip	Country	Zip Country
4. FEI Number 59-2084474		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent VANI, JOHN J 907 WHITEWATER COURT ALTAMONTE SPRINGS, FL 32714		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: <i>John J. Vani</i> , JOHN J. VANI, PRESIDENT 06/17/2003 (Signature, typed or printed name of registered agent must also be applicable) (NOTE: Registered Agent signature required when changing) DATE		
FILE NOW! FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V MARTIN, BILL 887 LITTLE BEND ROAD ALTAMONTE SPRINGS, FL 32714 ☒ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP <i>John Nandy</i> 873 Little Bend Rd Altamonte Springs, FL 32714 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P VANI, JOHN 907 WHITE WATER CT ALTAMONTE SPRINGS, FL 32714 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	S VANI, DEBROAH S 907 WHITEWATER COURT ALTAMONTE SPRINGS, FL 32714 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	T PAPIN, NICOLE 400 SHADY BANKS ALTAMONTE SPRINGS, FL 32714 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D EERDAM, LES 416 WEKIVA RAPIDS ALTAMONTE SPRINGS, FL 32714 ☒ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP <i>Dick McCluskey</i> 901 Great Bend Rd Altamonte Springs, FL 32714 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D COTTON, JOHNNY 409 WEKIVA RAPIDS ALTAMONTE SPRINGS, FL 32714 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP
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 the empowered. SIGNATURE: <i>John J. Vani</i> , JOHN J. VANI 06/17/2003 407.774.7726 (Signature and typed or printed name of signing officer or director) Date Daytime Phone #		

CR2E037 (10/02)