

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743199

FILED
Feb 20, 2012
Secretary of State

Entity Name: RIVERS EDGE HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

340 AMBERJACK PL
MELBOURNE BEACH, FL 32951

New Principal Place of Business:

Current Mailing Address:

P O BOX 510462
MELBOURNE BEACH, FL 32951

New Mailing Address:

FEI Number: 59-2381003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARY L. ROBINSON
340 AMBERJACK PL
MELBOURNE BEACH, FL 32951 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S
Name: PATERNOSTER, JUDY
Address: 2245 SOUTH RIVER ROAD
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VP
Name: LOGLISCI, VINCE
Address: 340 MARLIN PL
City-St-Zip: MELBOURNE BCH, FL 32951

Title: D
Name: COOPER, MINTON
Address: 290 MARLIN PL
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D
Name: SEIVERTH, RONALD
Address: 313 POMPANO PL
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: P
Name: KIRWIN, WILLIAM
Address: 320 AMBERJACK PL
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D
Name: RYBICKI, GEORGE
Address: 350 ALBACORE PL
City-St-Zip: MELBOURNE BEACH, FL 32951

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GARY L ROBINSON

T

02/20/2012

Electronic Signature of Signing Officer or Director

Date