
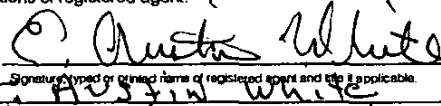



2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90262 019 ****61.25

DOCUMENT # 749499					
1. Entity Name RIVERWOOD ESTATES HOMEOWNERS ASSOCIATION INC.					
Principal Place of Business 240 RIVERWOOD ROAD NAPLES, FL 34114-3938 US			Mailing Address 240 RIVERWOOD ROAD NAPLES, FL 34114-3938 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0484978	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
PINTER, MICHAEL 4328 CORPORATE SQUARE SUITE C NAPLES, FL 34104-4780			Name BECKER & POLIAKOFF, PA Street Address (P.O. Box Number is Not Acceptable) 4501 TAMiami TRAIL NORTH, SUITE 214 City NAPLES, FLORIDA FL Zip Code 34103		
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 		04-07-2005 DATE			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TRACY, BYRON 120 ROOKERY RD. NAPLES, FL 341143938	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CAROL SMALLWOOD 201 ROOKERY RD. NAPLES, FL. 34114	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NOBLE, HUGH 235 RIVERWOOD DR. NAPLES, FL 341143938	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARLENE NORDBECK 27 LAKE DIANE DRIVE NAPLES, FL. 34114	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REX, ALBERT 40 ISLAND LAKE DR. NAPLES, FL 341143938	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT TRACY, BYRON 120 ROCKERY RD. NAPLES, FL 341143938	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JENNIFER KISSELL 258 RIVERWOOD RD. NAPLES, FL 34114	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD SANTORO, ALEXANDRA 210 RIVERWOOD DRIVE NAPLES, FL 34114	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LILLIAN POHORILAK 12 LAKE DIANE DRIVE NAPLES, FL. 34114	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ELLIS, JEWELL H 1772 BEVERLY DR. NAPLES, FL 34114	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHARLES ERKINGER 873 MANATEE RD. NAPLES, FL. 34114	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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 like empowered.					
SIGNATURE: 			Date 4-8-05 Daytime Phone # 239-261-4004		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					