04231999-90030-026-$61.25-$61.25

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90030 026 ****61.25

547459 - 90023 - 27

NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 751719

1. Corporation Name

RIVER GREENS HOMEOWNERS ASSOCIATION, INCORPORATE
D

Principal Place of Business	Mailing Address
2921 N TWIN LAKES DR AVON PARK FL 33825 US	2921 N TWIN LAKES DR AVON PARK FL 33825 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	03/26/1980
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 65-0402953 — Applied For / Not Applicable
23 City & State	28 City & State	5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
24 Zip — 25 Country	29 Zip — 30 Country	6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

SEIFERT, THOMAS B.
200 W. LAKE TROUT DR
AVON PARK FL 33825

10. Name and Address of New Registered Agent

81 Name: JUDY KAUTZ
82 Street Address (P.O. Box Number is Not Acceptable): 154 FAIRWAY DRIVE
83 AVON PARK F/A.
84 City: FL
85 Zip Code: 33825

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Judith A. Kautz [signature] 5/13/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~P~~	☑ ~~DELETE~~	1.1 TITLE	Director/VP	☐ Change ☒ Addition
NAME	~~BRUNSWICK, CAROLYN~~		1.2 NAME	Paul, James	
STREET ADDRESS	~~214 FAIRWAY DR~~		1.3 STREET ADDRESS	225 Fairway Dr.	
CITY-ST-ZIP	~~AVON PARK FL 33825~~		1.4 CITY-ST-ZIP	Avon Park, FL 33825	
TITLE	~~VP~~ D	☐ DELETE	2.1 TITLE	Director/Secretary	☐ Change ☒ Addition
NAME	GILLETT, CHARLIE		2.2 NAME	Bernloehr, Lois	
STREET ADDRESS	50 N LAKE TROUT DR		2.3 STREET ADDRESS	213 Hillcrest Dr.	
CITY-ST-ZIP	AVON PARK FL 33825		2.4 CITY-ST-ZIP	Avon Park, FL 33825	
TITLE	~~S~~	☑ ~~DELETE~~	3.1 TITLE	Director/Treasurer	☐ Change ☒ Addition
NAME	~~CRAIGO, JANE~~		3.2 NAME	Ketner, Bill	
STREET ADDRESS	~~130 LAKE TROUT DR~~		3.3 STREET ADDRESS	256 W. Lake Damon Dr.	
CITY-ST-ZIP	~~AVON PARK FL 33825~~		3.4 CITY-ST-ZIP	Avon Park, FL 33825	
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SEIFERT, TOM		4.2 NAME		
STREET ADDRESS	200 W. LAKE TROUT DR		4.3 STREET ADDRESS		
CITY-ST-ZIP	AVON PARK FL 33825		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	SNELLENBERGER, JOHN		5.2 NAME		
STREET ADDRESS	250 LAKE TROUT DRIVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	AVON PARK FL 33825		5.4 CITY-ST-ZIP		
TITLE	D + PRESIDENT	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	RAUTZ, JUDY		6.2 NAME		
STREET ADDRESS	154 FAIRWAY DR		6.3 STREET ADDRESS		
CITY-ST-ZIP	AVON PARK FL 33825		6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Bill Ketner, Treasurer [signature] 941-453-9138
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)