

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752216

FILED
Jan 30, 2012
Secretary of State

Entity Name: RIVER OAKS EAST PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

491 SOUTH RIVER OAKS DRIVE
INDIALANTIC, FL 32903 US

New Principal Place of Business:

499 NORTH RIVER OAKS DRIVE
INDIALANTIC, FL 32903 US

Current Mailing Address:

PO BOX 33533
INDIALANTIC, FL 32903 US

New Mailing Address:

FEI Number: 59-2167628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTRIOTTA, M.LUCILLE T
499 NORTH RIVER OAKS DR
INDIALANTIC, FL 32903 US

Name and Address of New Registered Agent:

CASTRIOTTA, M.LUCILLE
499 NORTH RIVER OAKS DR
INDIALANTIC, FL 32903 US

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: M.LUCILLE CASTRIOTTA

01/30/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: STOLDT, JARROD
Address: 1115 EAST RIVER OAKS DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: VP
Name: GRAINGER, MICHAEL
Address: 1080 EAST RIVER OAKS DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: S
Name: WELCH, DIANE
Address: 493 SOUTH RIVER OAKS DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: T
Name: CASTRIOTTA, M. LUCILLE
Address: 499 NORTH RIVER OAKS DR
City-St-Zip: INDIALANTIC, FL 32903

Title: D
Name: LAWRENCE, KARI
Address: 494 NORTH RIVER OAKS DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: D
Name: DONOVAN, DONNA
Address: 1079 EAST RIVER OAKS DRIVE
City-St-Zip: INDIALANTIC, FL 32903

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: M.LUCILLE CASTRIOTTA

T

01/30/2012

Electronic Signature of Signing Officer or Director

Date