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NONPROFIT CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # 754311

1. Corporation Name

RIVERS EDGE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

46 SUNSET DRIVE
 SEBASTIAN FL 32958
 US

Mailing Address

25 SUNSET DRIVE
 SEBASTIAN FL 32958
 US

5 596116 - 90008 - 22 6 *



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 19 Sunset Drive

Suite, Apt. #, etc.

27 Sebastian, FL

28 City & State

32958

29 Zip

30 Country

3. Date incorporated or Qualified

09/24/1980

4. FEI Number

59-2966850

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

DOMINIX, ELIZABETH J
 46 SUNSET DRIVE
 SEBASTIAN FL 32958

10. Name and Address of New Registered Agent

81 Name

TODD, DEBBIE

82 Street Address (P.O. Box Number is Not Acceptable)

20 SUNSET DRIVE

83

84 City

SEBASTIAN

FL

85 Zip Code

32958

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, am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Debbie Todd*

5/31/99

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
PD	DOMINIX, ELIZABETH J	46 SUNSET DRIVE	SEBASTIAN FL	<input type="checkbox"/>
VP	HLADISH, JOHN	43 SUNSET DR	SEBASTIAN FL 32958	<input type="checkbox"/>
TD	RIELGE, BELINDA A	250 SUNSET DRIVE	SEBASTIAN FL	<input type="checkbox"/>
S	LANGFORD, LINA	7 SUNSET DRIVE	SEBASTIAN FL	<input type="checkbox"/>
D	LAUWERET, BILL	18 SUNSET DRIVE	SEBASTIAN FL	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	TODD, DEBBIE	20 SUNSET DRIVE	SEBASTIAN - FL - 32958	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TD	HRUBY, ALICE	19 SUNSET DRIVE	SEBASTIAN - FL - 32958	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Belinda A. Riegle*

SIGNATURE REQUIRED: *Belinda A. Riegle* 5/31/99 561-589-8540

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)

0020971