

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754351

FILED
Mar 03, 2012
Secretary of State

Entity Name: RIVER OAKS IMPROVEMENT ASSOCIATION, INC.

Current Principal Place of Business:

519 S RIVER OAKS DR
INDIALANTIC, FL 32903

New Principal Place of Business:

Current Mailing Address:

519 S RIVER OAKS DR
INDIALANTIC, FL 32903

New Mailing Address:

FEI Number: 59-2950692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAPUANO, MATTHEW E
519 S RIVER OAKS DR
INDIALANTIC, FL 32903 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: PD
Name: KINCAID, BILL
Address: 505 N. RIVER OAKS DR
City-St-Zip: INDIALANTIC, FL 32903

Title: VD
Name: FARRAR, JOHN C
Address: 514 S. RIVER OAKS DR
City-St-Zip: INDIALANTIC, FL 32903

Title: TD
Name: CAPUANO, MATTHEW E
Address: 519 S RIVER OAKS DR
City-St-Zip: INDIALANTIC, FL 32903

Title: D
Name: PERI, ANTHONY
Address: 507 N. RIVER OAKS DR.
City-St-Zip: INDIALANTIC, FL 32903

Title: D
Name: ALMOND, LEE
Address: 502 S. RIVER OAKS DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: SD
Name: ROBISON, ENA
Address: 502 N. 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: MATTHEW E. CAPUANO

TD

03/03/2012

Electronic Signature of Signing Officer or Director

Date