

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 758986

FILED
Apr 28, 2014
Secretary of State

Entity Name: RIVERS EDGE ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10 OUTLET DR
LAKE PANASOFFKEE, FL 33538 US

New Principal Place of Business:

Current Mailing Address:

10 OUTLET DR
LAKE PANASOFFKEE, FL 33538 US

New Mailing Address:

FEI Number: 59-1326642 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FALLACE, MARK
20 CANAL COURT
LAKE PANASOFFKEE, FL 33538 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: MARK FALLACE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: FALLACE, MARK
Address: 20 CANAL COURT
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: SD
Name: HANZEL, NORA
Address: 34 CANAL COURT
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: TD
Name: BAILEY, ORDELLA
Address: 44 CANAL COURT
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: DVP
Name: KIRBY, JERRE
Address: 53 OUTLET DRIVE
City-St-Zip: LAKE PANASOFFKEE, FL 33538

Title: S/A
Name: MONDA, JAMES A
Address: 44 CANAL COURT
City-St-Zip: LAKE PANASOFFKEE, FL 33538

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: MARK FALLACE

Electronic Signature of Signing Officer or Director

PD

04/28/2014

Date