FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995** S.1.95 B.7715C

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **761171** (8)

1. Corporation Name

RIVER OAKS ESTATES HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
RIVER OAKS DRIVE P. O. BOX 513 OSTEEN FL 32764	RIVER OAKS DRIVE P. O. BOX 513 OSTEEN FL 32764

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/18/1981
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2715006 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

~~LUNSFORD, OSCAR~~ Polly D. Geltz
~~1325 DEER PATH DRIVE~~ 680 River Oaks Dr.
~~OSTEEN FL 32764~~ Osteen Fl. 32764

10. Name and Address of New Registered Agent

81 Name: CAROLE LALLY
82 Street Address (P.O. Box Number is Not Acceptable): 1290 Deer Path Dr.
83
84 City: OSTEEN FL 85 Zip Code: 32764

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Polly D. Geltz — Signature, typed or printed name of registered agent and title if applicable — Polly D. Geltz — (NOTE: Registered Agent signature required when reinstating) — DATE: 6-26-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	☒ Change ☐ Addition
TITLE	P	11 TITLE	P
NAME	LUNSFORD, OSCAR	12 NAME	CAROLE LALLY
STREET ADDRESS	1325 DEER PATH DRIVE	13 STREET ADDRESS	1290 Deer Path Dr.
CITY-ST-ZIP	OSTEEN FL	14 CITY-ST-ZIP	Osteen Fl. 32764
TITLE	V	21 TITLE	V
NAME	BIRD, BETTY	22 NAME	FRANK LALLY
STREET ADDRESS	1365 DEER PATH DRIVE	23 STREET ADDRESS	1290 Deer Path Dr.
CITY-ST-ZIP	OSTEEN FL	24 CITY-ST-ZIP	Osteen Fl 32764
TITLE	TS	31 TITLE	TS
NAME	FERDERBER, MARY ELLEN	32 NAME	JAMES L. GELTZ
STREET ADDRESS	600 RIVER OAKS DR.	33 STREET ADDRESS	680 River Oaks Dr.
CITY-ST-ZIP	OSTEEN FL	34 CITY-ST-ZIP	Osteen Fl 32764
TITLE	D	41 TITLE	D
NAME	JACOBS, BILL	42 NAME	MARY ELLEN FERDERBER
STREET ADDRESS	1220 TALL PINES DRIVE	43 STREET ADDRESS	600 River Oaks Dr.
CITY-ST-ZIP	OSTEEN FL	44 CITY-ST-ZIP	Osteen Fl 32764
TITLE	D	51 TITLE	D
NAME	BLACKMON, LARRY	52 NAME	JOE LINTON
STREET ADDRESS	1299 QUAIL RUN	53 STREET ADDRESS	2473 Reed Ellis Rd.
CITY-ST-ZIP	OSTEEN FL	54 CITY-ST-ZIP	Osteen Fl. 32764
TITLE	D	61 TITLE	D
NAME	GELTZ, JAMES	62 NAME	SCOTT McCASKILL
STREET ADDRESS	1433 LAKE HIGHLAND DR.	63 STREET ADDRESS	1299 Quail Run
CITY-ST-ZIP	ORLANDO FL	64 CITY-ST-ZIP	Osteen Fl. 32764 SW

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James L. Geltz — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — JAMES L. GELTZ — Date: 4-20-95 — Daytime Phone #: 407-324-2536

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