2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 28, 2000 8:00 am
Secretary of State
08-28-2000 90041 022 ****61.25

DOCUMENT # 761171

1. Entity 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

U00081779

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2715006 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BURCHER, KERIN 1321 DEER PATH DRIVE OSTEEN FL 32764	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 13, 2000 min. will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PARKS, CAROL 1450 DEER PATH DRIVE OSTEEN FL 32764	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SANDRO DIAZ 1340 Deer PATH Dr Osteen, FLA 32764	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V FERDERBER, ROBERT 600 RIVER OAKS DRIVE OSTEEN FL 32764	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BURCHER, KERIN 1321 DEER PATH DR OSTEEN FL 32764	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Rebecca Wilson 234 South 4 Street Lake Mary FLA 32746	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LYNN BOWEN 1325 DEER PATH DR OSTEEN FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mike Bowen 1325 Deer PATH Dr Osteen, FLA 32764	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RUTLEDGE, RAY 1450 DEER PATH DRIVE OSTEEN FL 32764	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHULTZ, CARYN 1310 DEER PATH DR OSTEEN FL 32764	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (5/00)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 21 AUG 2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #