2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2011
Secretary of State

DOCUMENT# 761171

Entity Name: RIVER OAKS ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

RIVER OAKS DRIVE
P. O. BOX 513
OSTEEN, FL 32764

New Principal Place of Business:

RIVER OAKS ESTATES HOMEOWNERS ASSOC
P. O. BOX 513
OSTEEN, FL 32764

Current Mailing Address:

RIVER OAKS DRIVE
P. O. BOX 513
OSTEEN, FL 32764

New Mailing Address:

RIVER OAKS ESTATES HOMEOWNERS ASSOC
P. O. BOX 513
OSTEEN, FL 32764

FEI Number: 59-2715006 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOWEN, LYNNE C
1325 DEER PATH DR.
OSTEEN, FL 32764 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: P
Name: ZOOK, ROBIN
Address: 1335 DEER PATH DR
City-St-Zip: OSTEEN, FL 32764

Title: VP
Name: BOWEN, JOHN M
Address: 1325 DEER PATH DR
City-St-Zip: OSTEEN, FL 32764

Title: S
Name: BOWEN, JASON
Address: 679 RIVER OAKS DRIVE
City-St-Zip: OSTEEN, FL 32764

Title: T
Name: BOWEN, LYNNE
Address: 1325 DEER PATH DRIVE
City-St-Zip: OSTEEN, FL 32764

Title: D
Name: SHEPHERD, TIMOTHY
Address: 355 RIVER OAKS DR.
City-St-Zip: OSTEEN, FL 32764

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: LYNNE C BOWEN T 03/03/2011

Electronic Signature of Signing Officer or Director — Date