

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762256

FILED
Feb 17, 2010
Secretary of State

Entity Name: RIVER RANCH PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

18550 COUNTRY RD. #630 EAST
LAKE WALES, FL 33898

New Principal Place of Business:

Current Mailing Address:

18550 COUNTRY RD. #630 EAST
LAKE WALES, FL 33898 US

New Mailing Address:

FEI Number: 59-2164728

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, SANDY
18550 CR 630 EAST
LAKE WALES, FL 33898 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: EDWARDS, PETE
Address: 18550 COUNTY RD 630 EAST
City-St-Zip: LAKE WALES, FL 33898

Title: VP
Name: BUSH, JERRY
Address: 18550 COUNTRY RD. #630 EAST
City-St-Zip: LAKE WALES, FL 33898

Title: T
Name: HOSLER, JANET
Address: 18550 COUNTRY RD. #630 EAST
City-St-Zip: LAKE WALES, FL 33859

Title: S
Name: EDWARDS, SANDY
Address: 18550 COUNTRY RD. #630 EAST
City-St-Zip: LAKE WALES, FL 33853

Title: D
Name: FITZPATRICK, BILLY
Address: 18550 COUNTY RD 630 EAST
City-St-Zip: LAKE WALES, FL 33898

Title: D
Name: SUMNER, MIKE
Address: 18550 COUNTY RD, 630 EAST
City-St-Zip: LAKE WALES, FL 33898

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: SANDY EDWARDS

SEC

02/17/2010

Electronic Signature of Signing Officer or Director

Date