

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # 762844

1. Entity Name
NORTH RIVER OAKS ASSOCIATION, INC.



Principal Place of Business

**18931 SERENOA CT
ALVA, FL 33920 US**

Mailing Address

**18931 SERENOA CT
ALVA, FL 33920 US**

DO NOT WRITE IN THIS SPACE



04302006 No Chg-NP

CR2E037 (4/06)

4. FEI Number
25-0335554

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**TILTON, ANDREW D
18811 SERENOA CT
ALVA, FL 33920**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	TILTON, ANDREW D.
STREET ADDRESS	18811 SERENOA CT
CITY- ST- ZIP	ALVA, FL
TITLE	SD
NAME	CARY, KEITH G
STREET ADDRESS	P O BOX 718
CITY- ST- ZIP	FORT MYERS, FL 33902
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U000000561858
05/19/06-80031-025 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

G. KEITH CARY

30 APRIL 06

Date

Daytime Phone #