## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#763892** 

FILED Jan 20, 2009 Secretary of State

Entity Name: CROTON RIVER HOMEOWNERS ASSOCIATION, INC.

**New Principal Place of Business: Current Principal Place of Business:** 

770 AVOCADO DRIVE

MERRITT ISLAND, FL 32953 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 541689

MERRITT ISLD, FL 32954 US

FEI Number: 65-0868436 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TRIBE, JOHN 770 AVOCADO DRIVE MERRITT ISLAND, FL 32953

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:

Date

Electronic Signature of Registered Agent

US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

() Delete

(X) Change ( ) Addition

FARLEY, MAX

LATHAM, JIM Name: Name: 720 RIVER OAKS LANE Address: Address:

735 AVOCADO DRIVE City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: SCRUGGS, SUE Name: SCRUGGS, SUE

Address: 730 AVOCADO DRIVE Address: 730 AVOCADO DRIVE City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: () Delete Title: TD (X) Change ( ) Addition

TRIBE, JOHN TRIBE, JOHN Name: Name: 770 AVOCADO DRIVE Address: Address: 770 AVOCADO DRIVE

City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: **VPD** ( ) Delete Title: VPD (X) Change ( ) Addition

Name: FARLEY, MAX Name: **EVANS RAY** Address: 735 AVOCADO DRIVE Address: 735 RIVER OAKS LANE City-St-Zip: MERRITT ISLAND, FL 32953 City-St-Zip: MERRITT ISLAND, FL 32953 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOHN TRIBE TD 01/20/2009