2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763965

FILED Mar 05, 2007 Secretary of State

Entity Name: LAND OWNERS ASSOC. OF RIVER OAKS, INC.

| Current Principal Place of Business: | | | | New Principal Place of Business: | | | |
|------------------------------------------------------------------|-------------------------------------------------------|---------------------------------|-----------|-----------------------------------------------------------------------|-------------------------------------------------------|----------------------|-------------------|
| C/O DEAN JOHNSON 12545 AQUA LANE, SW MOORE HAVEN, FL 33471 | | | | C/O APRIL BEAVERS 3450 RIVERVIEW DRIVE SW MOORE HAVEN, FL 33471 | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | |
| C/O DEAN JOHNSON 12545 AQUA LANE, SW MOORE HAVEN, FL 33471 | | | | C/O APRIL BEAVERS 3540 RIVERVIEW DRIVE MOORE HAVEN, FL 33471 | | | |
| FEI Number: | 04-3803652 | FEI Number Applied For () | FEI Num | ber Not Appl | licable () | Certificate of Statu | ıs Desired () |
| Name and | Address of C | urrent Registered Agent: | | Name and | Address of N | lew Registered / | Agent: |
| MOORE H The above | RVIEW DR SW AVEN, FL 334 | | ırpose of | changing i | ts registered o | ffice or registered | l agent, or both, |
| SIGNATUF | RE: | | | | | | |
| | Electron | ic Signature of Registered Ager | nt | | | Date | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | P () BEAVERS, APR 3540 RIVERVIE MOORE HAVEN | W DR SW | | Title: Name: Address: City-St-Zip: | () | Change () Addition | |
| Title: Name: Address: City-St-Zip: | V () JOHNSON, DEA 12645 AQUA LN MOORE HAVEN | ISW | | Title: Name: Address: City-St-Zip: | V (X STEGER, JOYO 3275 RIVERVI MOORE HAVEN | EW DR SW | 1 |
| Title: Name: Address: City-St-Zip: | D () MILLER, CHARI 49 RIVERVIEW MOORE HAVEN | DR | | Title: Name: Address: City-St-Zip: | D (X MILLER, CHAR 3355 RIVERVIE MOORE HAVEN | W DRIVE SW | 1 |
| Title: Name: Address: City-St-Zip: | S () HUCKER, ALISA 12655 ARBOR I MOORE HAVEN | LANE SW | | Title: Name: Address: City-St-Zip: | () | Change () Addition | |
| Title: Name: Address: City-St-Zip: | T () CONYERS, DAL 12545 AQUA LA MOORE HAVEN | NE SW | | Title: Name: Address: City-St-Zip: | T (X BEAVERS, H. I 3540 RIVERVIE MOORE HAVEN | W DR SW | 1 |
| Title: Name: Address: City-St-Zip: | SANBORN, CLY 12640 ARBOR I | | | Title: Name: Address: City-St-Zip: | () | Change () Addition | |
| | | | | | | | |

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLES MILLER D 03/05/2007