
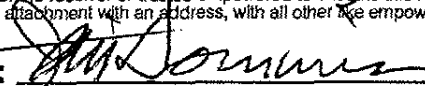


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**May 01, 2006 08:00 AM
Secretary of State**

DOCUMENT # 769396		
1. Entity Name RIVER OAKS TOWNHOMES OF SEBASTIAN OWNERS ASSOCIATION, INC.		
Principal Place of Business 732 CLEVELAND ST. B-14 SEBASTIAN, FL 32958 US	Mailing Address 732 CLEVELAND ST. B-14 SEBASTIAN, FL 32958 US	
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent DOMINEAU, JIM 732 CLEVELAND STREET, B-14 SEBASTIAN, FL 32958		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1100000553733 05/15/06-80065-001 61.25
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREENE, LAURIE 732 CLEVELAND STREET A-3 SEBASTIAN, FL 32958	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS DOMINEAU, JIM 732 CLEVELAND ST., UNIT B9 SEBASTIAN, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAUTH, GENE A 732 CLEVELAND ST. B-15 SEBASTIAN, FL 32958	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAY, MAXINE K 732 CLEVELAND STREET A-4 SEBASTIAN, FL 32958	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GEIER, ADELL J 732 CLEVELAND ST A-6 SEBASTIAN, FL 32958	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEWITT, ANGUS 732 CLEVELAND ST. B-10 SEBASTIAN, FL 32958	
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 fee empowered.		
SIGNATURE:  Jim Domineau 4/27/06 772-388-4618 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		