2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2009
Secretary of State

DOCUMENT# 770464

Entity Name: ORTEGA RIVER RUN, INC.

Current Principal Place of Business:

4114 OXFORD AVE
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

4114 OXFORD AVE
JACKSONVILLE, FL 32210 US

New Mailing Address:

FEI Number: 59-2445899 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHUNN, DOUGLAS D.
1800 FIRST UNION NATIONAL BANK TOWER
225 WATER STREET
JACKSONVILLE, FL 32202 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:	D	( ) Delete
Name:	EGAN, GEORGE M	
Address:	4114 OXFORD AVE	
City-St-Zip:	JACKSONVILLE, FL 32210	
Title:	TSD	( ) Delete
Name:	CALHOUN, FLORENCE	
Address:	4114 OXFORD AVE	
City-St-Zip:	JACKSONVILLE, FL 32210	
Title:	D	( ) Delete
Name:	EBERLY, ALISON	
Address:	4114 OXFORD AVE.	
City-St-Zip:	JACKSONVILLE, FL 32210	
Title:	D	( ) Delete
Name:	HARDAGE, LOUISE C	
Address:	4114 OXFORD AVE.	
City-St-Zip:	JACKSONVILLE, FL 32210	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	( ) Change (X) Addition
Name:	KETCHUM, MELISSA M	
Address:	4114 OXFORD AVE	
City-St-Zip:	JACKSONVILLE, FL 32210	

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: FLORENCE CALHOUN TSD 02/26/2009
Electronic Signature of Signing Officer or Director — Date