

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770690

FILED  
Jan 13, 2011  
Secretary of State

**Entity Name:** RIVER GARDENS ASSOCIATION, INC.

**Current Principal Place of Business:**

3406 RIVER GARDENS CIRCLE  
PENSACOLA, FL 32514 US

**New Principal Place of Business:**

**Current Mailing Address:**

3406 RIVER GARDENS CIRCLE  
PENSACOLA, FL 32514

**New Mailing Address:**

3406 RIVER GARDENS CIRCLE  
GERALDBJONES@CS.COM  
PENSACOLA, FL 32514 US

**FEI Number:** 59-2439917

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JONES, GERALD B  
3406 RIVER GARENS CIRCLE  
PENSACOLA, FL 32514 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  
**Name:** ALLERELLIE, LYNN  
**Address:** 3456 RIVER GARDENS CIR  
**City-St-Zip:** PENSACOLA, FL 32514

**Title:** DT  
**Name:** JONES, GERALD B  
**Address:** 3406 RIVER GARDENS CIRCLE  
**City-St-Zip:** PENSACOLA, FL 32514

**Title:** DP  
**Name:** MIHALICK, JOHN  
**Address:** 47 SUGARBERRY RD  
**City-St-Zip:** PENSACOLA, FL 32514

**Title:** DS  
**Name:** SKALICKY, MARION  
**Address:** 14 ROCKWOOD RD.  
**City-St-Zip:** PENSACOLA, FL 32514

**Title:** D  
**Name:** WILLIFORD, HUBERT  
**Address:** 22 ROCKWOOD RD.  
**City-St-Zip:** PENSACOLA, FL 32514

**Title:** D  
**Name:** PACE, GLENDA  
**Address:** 51 SUGARBERRY RD  
**City-St-Zip:** PENSACOLA, FL 32514

I hereby 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 all other like empowered.

**SIGNATURE:** GERALD B. JONES

DT

01/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date