

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001924

FILED  
Mar 31, 2009  
Secretary of State

**Entity Name:** RIVER HILLS RESERVE OWNERS SUB-ASSOCIATION, INC.

**Current Principal Place of Business:**

RIVER HILLS RESERVES HOA  
ORANGE PARK, FL 32003

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 475 W. TOWN PL  
SUITE 100  
SAINT AUGUSTINE, FL 320923649

**New Mailing Address:**

**FEI Number:** 65-1020010      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

TRENT, SEVERN  
475 WEST TOWN PLACE  
SUITE 100  
SAINT AUGUSTINE, FL 32092 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: TS ( ) Delete  
Name: LANGONE, TONY  
Address: 1976 HICKORY TRACE DR  
City-St-Zip: ORANGE PARK, FL 32003

Title: VP ( ) Delete  
Name: RAFFERTY, JOHN  
Address: 1744 RIVER HILLS DR  
City-St-Zip: ORANGE PARK, FL 32003

Title: P ( ) Delete  
Name: HUFFMAN, CLARK  
Address: 1938 HICKORY TRACE DRIVE  
City-St-Zip: ORANGE PARK, FL 32003

Title: D ( ) Delete  
Name: CELLA, MIKE  
Address: 1910 HICKORY TRACE DR  
City-St-Zip: ORANGE PARK, FL 32003

Title: D ( ) Delete  
Name: COYLE, CHRIS  
Address: 1886 HICKORY TRACE DRIVE  
City-St-Zip: ORANGE PARK, FL 32003

**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: D (X) Change ( ) Addition  
Name: SINEATH, JOSEPH ERIC  
Address: 1878 HICKORY TRACE DRIVE  
City-St-Zip: ORANGE PARK, FL 32003

Title: SEC (X) Change ( ) Addition  
Name: COYLE, CHRIS  
Address: 1886 HICKORY TRACE DRIVE  
City-St-Zip: ORANGE PARK, FL 32003

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: DANA SCHEINER

AGEN

03/31/2009

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

\_\_\_\_\_  
Date