2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2008
Secretary of State

DOCUMENT# N00000005805

Entity Name: RIVENDELL HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

3026 S.W. 41ST LANE
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

3026 S.W. 41ST LANE
OCALA, FL 34474

New Mailing Address:

FEI Number: 59-3250872 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ASHLOCK, GARY
3068 SW 41ST LANE
OCALA, FL 34474 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: PD ( ) Delete
Name: MOYER, JAMES R
Address: 3051 SW 41 PLACE
City-St-Zip: OCALA, FL 34474

Title: TD ( ) Delete
Name: MOYER, MARYGRACE
Address: 3051 SW 41 PLACE
City-St-Zip: OCALA, FL 34474

Title: SD ( ) Delete
Name: YOUNG, SHEILA
Address: 2932 SW 41ST PLACE.
City-St-Zip: OCALA, FL 34474

Title: D ( ) Delete
Name: ASHLOCK, GARY
Address: 3068 SW 41ST LANE
City-St-Zip: OCALA, FL 34474

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: BICE, JEAN
Address: 4123 SW 30 COURT
City-St-Zip: OCALA, FL 34474

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: MARYGRACE MOYER TREA 03/18/2008

Electronic Signature of Signing Officer or Director Date