2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # N0100008699 1. Entity Name RIVER OAKS RESERVE COMMERCIAL TRACT PROPERTY OWNERS ASSOCIATION, INC.							
•	R BLVD.,STE. 601	Mailing Address 5728 MAJOR BLVD.,STE. 601 ORLANDO, FL 32819					, · · · ·
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r	OO NOT WRITE	N THIS SPACE		02162005	No Chg-NP	CR2E037 (1	0/03)
Į.	O NOT WHITE			4. FEI Numb 04-360			Applied For Not Applicable
	6. Name and Address of Current Reg	ristered Agent		Certificate	of Status Desired		75 Additional Required
5728 MAJ	HOLDINGS VII,INC. IOR BLVD.,STE. 601 O, FL. 32819		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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature inquired when reinstating)						DATE	
	Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Finan Trust Fund Contribution,	+-··	00 May Be			
10.	OFFICERS AND DIR	ECTORS					
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HODGE, RANDALL R 5728 MAJOR BLVD.,STE. 601 ORLANDO, FL. 32819	.	_		U0000 04/29/09	90343819 5-80113-00	08 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVTS TEAGUE, PAIGE A 7536 W. SAÑŌLAKE ROAD ORLANDO, FL 32819	in the second se					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-	DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		IN T	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					_		
TITLE Name Street address City-St-Zip						:	
OI III E COII	certify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee empowers or on an attachment with an address, with a	a lo execute inis tenon as tenone	nption stated in Sect ire shall have the sa ad by Chapter 617, I	tion 119.07(3)(i me legal eifect Florida Statutes), Florida Statutes. I as if made under o at and that my name	further certify that ath; that I am an c appears in Block	the information officer or director 10 or Block 11 if
SIGNATURE: 4/27/05 (407)354-2200 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Dayline Phone 8							