

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01637

FILED
Feb 19, 2007
Secretary of State

Entity Name: RIVER RUN OF SEBASTIAN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2001 9TH AVE
308
VERO BEACH, FL 32960 US

New Principal Place of Business:

Current Mailing Address:

2001 9TH AVE
308
VERO BEACH, FL 32960 US

New Mailing Address:

FEI Number: 59-2676381

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, WILLIAM F
2001 9TH AVE
SUITE 308
VERO BEACH, FL 32960 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: BRAUN, JOSEPH
Address: 6503 RIVER RUN DRIVE
City-St-Zip: SEBASTIAN, FL 32958

Title: VPD () Delete
Name: BURKE, JAY
Address: 6011 RIVER RUN DRIVE
City-St-Zip: SEBASTIAN, FL 32958

Title: TD () Delete
Name: JACKSON, MICHAEL
Address: 5944 RIVER RUN DRIVE
City-St-Zip: SEBASTIAN, FL 32958

Title: SD () Delete
Name: MITCHELL, ROY
Address: 6144 RIVER RUN DRIVE
City-St-Zip: SEBASTIAN, FL 32958

Title: D () Delete
Name: TALLEY, BETTY
Address: 6023 RIVER RUN DRIVE
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: BRAUN, JOSEPH
Address: 6503 RIVER RUN DRIVE
City-St-Zip: SEBASTIAN, FL 32958

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: JACKSON, MICHAEL
Address: 5944 RIVER RUN DRIVE
City-St-Zip: SEBASTIAN, FL 32958

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: LANPHIER, KAREN
Address: 6280 RIVER RUN DRIVE
City-St-Zip: SEBASTIAN, FL 32958

I hereby certify that the information supplied with this filing does not qualify for the 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: KAREN LANPHIER

PD

02/19/2007

Electronic Signature of Signing Officer or Director

Date