

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000240

FILED
Apr 16, 2009
Secretary of State

Entity Name: RIVERCREST COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

4131 GUNN HWY
TAMPA, FL 33618

New Principal Place of Business:

Current Mailing Address:

4131 GUNN HWY
TAMPA, FL 33618

New Mailing Address:

FEI Number: 04-3626900

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTIAGO, ROLANDO
RJS LAW GROUP
240 APOLLO BEACH BLVD
APOLLO BEACH, FL 33572 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: DV () Delete
Name: MAZZA, ARTHUR
Address: 11412 CAPTIVA KAY DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: PD () Delete
Name: FERNANDEZ, LISA
Address: 11644 CREST CREEK DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: SD () Delete
Name: KERR, TANIA
Address: 11603 BAYLOR CT
City-St-Zip: RIVERVIEW, FL 33569

Title: DT () Delete
Name: DOHERTY, LINDA
Address: 11466 CAPTIVA KAY DR
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: URBANO, MARIA
Address: 1426 MAXIMILIAN DR.
City-St-Zip: WESLEY CHAPEL, FL 33543

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: GONZALEZ, KENNETH
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: PD (X) Change () Addition
Name: FERNANDEZ, LISA
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: SD (X) Change () Addition
Name: KERR, TANIA
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: DT (X) Change () Addition
Name: DOHERTY, LINDA
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: D (X) Change () Addition
Name: HARDMAN, ROBERT J
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

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: LISA FERNANDEZ

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date