## **2008 NOT-FOR-PROFIT CORPORATION**

## **ANNUAL REPORT**



FILED Apr 15, 2008 8:00 am Secretary of State 04-15-2008 90015 025 \*\*\*\*61.25

DOCUMENT # N0200	00006476
1. Entity Name RIVER BEND HOMEOWNER INC.	'S ASSOCIATION OF PASCO,
Principal Place of Business	Mailing Address

C/O SEABOARD ARBOR MGMT 2189 CLEVELAND ST STE 225			C/O S 2189	Mailing Address C/O SEABOARD ARBOR MGMT 2189 CLEVELAND ST STE 225 CLEARWATER, FL 33765										
Principal Place of Business - No P.O. Box #     Mailing Address								<b>3</b> 110						
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.			01282008 Chg-NP CR2E037 (12/06)							
City & State			City	City & State			4. FEI Number Applied For 75-3106203 Not Applicable							
Žip		Country	Zip Co.			ntry		5. Certificate of Status Desired S8.75 Additional Fee Required						
6. Name and Address of Current Registered Agent								7. Name and	Address of I	New Regi:	stered Ag	ent		
LEIGHTN, LEONARD C/O SEABOARD ARBORS MGMT 2189 CLEVELAND ST STE 225				Name Street Address (P.O. Box Number is Not Acceptable)										
CLEARWATER, FL 33765				City			· · · · · · · · · · · · · · · · · · ·		Ei	Zip Code	,			
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. (MOTE: Registered Agent signature required when reinstating)  DATE														
Filing Fee is \$61.25  Due by May 1, 2008  9. Election Campaign F  Trust Fund Contributi						\$5.00 May Be Added to Fees	,			payable to nent of St				
10.		OFFICERS AND DIF	ECTORS		11.		P	ADDITIONS/CHA	NGES TO O	FFICERS	AND DIRE	CTORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6506 GRE	S, LEONARD EN ACRES BLVD RT RICHEY, FL 34655		☐ Delete								☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6553 GRE	A, JAMES EN ACRES BLVD RT RICHEY, FL 34655		<b>□</b> Delete	4		Sh 5 2	Grovt y Croen A =. R. F	cres B	llud 655		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6608 GR	RICK, JOAN EEN ACRES BLVD RT RICHEY, FL 34655		☐ Delete			·					Change	☐ Additlan	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete								Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Defete								Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Delete								☐ Change	Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: