

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 17, 2006 8:00 am**  
**Secretary of State**

05-17-2006 90016 028 \*\*\*\*61.25

<b>DOCUMENT # N02000006605</b> 1. Entity Name RIVERSIDE OAKS HOMEOWNERS' ASSOCIATION, INC.			
Principal Place of Business C/O BRISTOL MGMT. SERVICES 1930 COMMERCE LANE, #1 JUPITER, FL 33458 US		Mailing Address 1930 COMMERCE LANE SUITE #1 JUPITER, FL 33458 US	
2. Principal Place of Business 13170 Bonnetta Drive Suite, Apt. #, etc.		3. Mailing Address 13170 Bonnetta Drive Suite, Apt. #, etc.	
City & State Palm Beach Gardens FL		City & State Palm Beach Gardens FL	
Zip 33418	Country USA	Zip 33418	Country USA
4. FEI Number 01-0778729		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  INGLIS, STEVE C/O BRISTOL MANAGEMENT 1930 COMMERCE LANE STE 1 JUPITER, FL 33458		7. Name and Address of New Registered Agent Name <u>Stewart D. Rosenbaum, CFP</u> Street Address (P.O. Box Number is Not Acceptable) 116 Intracoastal Pointe Dr #200 City <u>Jupiter</u> <u>FL</u> Zip Code <u>33411</u>	
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 <u>Stewart D. Rosenbaum</u>		DATE <u>3/10/06</u>	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ENICHOCS, TIMOTHY 133 MAGNOLIA WAY TEQUESTA, FL 33469 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	John Hayes <u>President</u> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 123 Magnolia Way Tequesta, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MARTIN, FAITH 145 MAGNOLIA WAY TEQUESTA, FL 33469 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Stewart D. Rosenbaum <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 149 Magnolia Way Tequesta, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST VINCELLI, KIMBERLY 115 MAGNOLIA WAY TEQUESTA, FL 33469 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Wayne Poerio <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 132 Magnolia Way Tequesta, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Stewart D. Rosenbaum</u>		DATE <u>3/10/06</u> (521) 744-052	