


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

03-16-2005 90047 036 \*\*\*\*61.25

<b>DOCUMENT # N02000007803</b> 1. Entity Name <b>RIVER RIDGE FOREST PROPERTY OWNERS' ASSOCIATION, INC.</b>					
Principal Place of Business <b>4127 NW 27TH LN. SUITE A GAINESVILLE FL 32606</b>			Mailing Address <b>PO BOX 357845 GAINESVILLE FL 32635</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>56-2298368</b> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				1st MOORE CR2E037 (10/04)	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>DAVIES, LISA 4127 NW 27TH LN., SUITE A GAINESVILLE FL 32606</b>			Name <b>JOHN H. SCHARBER</b> Street Address (P.O. Box Number is Not Acceptable) <b>32111 DABBY RD.</b> City <b>DADE CITY</b> FL <b>33505</b>		
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 <b>JOHN H. SCHARBER</b> <i>John H. Scharber</i> (NOTE: Registered Agent signature required when reinstating) DATE					
<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		<b>Make Check Payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP MCDONALD, JANET L 4127 NW 27TH LN., SUITE A GAINESVILLE FL 32606</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRESIDENT PETER SZYMALA 11502 SW 129TH PLACE MIAMI, FLA 33166</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DV LEE, DENNIS G 4127 NW 27TH LN., SUITE A GAINESVILLE FL 32606</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V-PRESIDENT WAYNE SHORMAKER 4813 BIG OAKS LANE ORLANDO, FLA 32806</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DST DAVIES, LISA 4127 NW 27TH LN., SUITE A GAINESVILLE FL 32606</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEC-TRRS. JOHN H. SCHARBER 32111 DABBY RD. DADE CITY, FLA 33505</b> <input checked="" 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		
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 exemption stated in Section 119.07(3)(i), 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: <b>John H. Scharber</b> <i>John H. Scharber</i> <b>3-6-05</b> <b>352-588-3050</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

ATTACHMENT

66813413

# N02600007803

MAILING ADDRESS:

RIVER RIDGE FOREST PROPERTY OWNERS  
ASSOCIATION INC.

P. O. Box 824

SAN ANTONIO, FLA 33576

JOHN H SCHARBER

SEC/ TRS.

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