

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001082

FILED
Mar 19, 2012
Secretary of State

Entity Name: RIVERSIDE RECREATION ASSOCIATION, INC.

Current Principal Place of Business:

5297 S. CHEROKEE WAY
HOMASASSA, FL 34448

New Principal Place of Business:

Current Mailing Address:

5297 S. CHEROKEE WAY
HOMASASSA, FL 34448

New Mailing Address:

FEI Number: 06-1687985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OAKES, GAIL
5297 S. CHEROKEE WAY
HOMASASSA, FL 34448 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: DP
Name: OAKES, GAIL G
Address: 5297 S. CHEROKEE WAY
City-St-Zip: HOMASASSA, FL 34448

Title: DV
Name: TELATNIK, JOHN
Address: 5297 S. CHEROKEE WAY
City-St-Zip: HOMASASSA, FL 34448

Title: DS
Name: CURTIS, TOM
Address: 5297 S. CHEROKEE WAY
City-St-Zip: HOMASASSA, FL 34448

Title: DT
Name: CHEWNING, EUGENE
Address: 5297 S CHEROKEE WAY
City-St-Zip: HOMASASSA, FL 34448

Title: D
Name: KIRKPATRICK, CARLISLE
Address: 5297 S CHEROKEE WAY
City-St-Zip: HOMASASSA, FL 34448

I hereby 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 all other like empowered.

SIGNATURE: GAIL OAKES

DP

03/19/2012

Electronic Signature of Signing Officer or Director

Date