2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N03000001095

Entity Name: RIVERHOUSE RETREAT PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10 KINGS BAY DR
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

Current Mailing Address:

PO BOX 490
CRYSTAL RIVER, FL 34423

New Mailing Address:

FEI Number: 57-1155840 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BARNES & COHEN, CPA'S
441 NE 1ST STREET
PO BOX 490
CRYSTAL RIVER, FL 34423 US

Name and Address of New Registered Agent:

BARNES AND COHEN, CPA'S
441 NE 1ST STREET
CRYSTAL RIVER, FL 34429 US

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: RON COHEN, CPA 04/13/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: BRENEN, GERALD
Address: 4498 NE 18 TERRACE
City-St-Zip: OCALA, FL 34479

Title: P ( ) Delete
Name: REDRICK, STUART
Address: 1921 NW 18 ST
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: ST ( ) Delete
Name: ROZEMAN, WENDY
Address: 880 NW 70 TERR
City-St-Zip: OCALA, FL 34482

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change ( ) Addition
Name: BAENEN, GERALD
Address: 4498 NE 18 TERRACE
City-St-Zip: OCALA, FL 34479

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change ( ) Addition
Name: BOZEMAN, WENDY
Address: 880 NW 70 TERR
City-St-Zip: OCALA, FL 34482

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: STUART REDRICK P 04/13/2009
Electronic Signature of Signing Officer or Director Date