

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003887

FILED  
May 02, 2011  
Secretary of State

**Entity Name:** RICHMOND ESTATES NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

3032 PINDER CT  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

3032 PINDER CT.  
ORLANDO, FL 32811

**New Mailing Address:**

**FEI Number:** 36-4535293

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MYERS, JOYCE  
3032 PINDER CT.  
ORLANDO, FL 32811 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: PD  
Name: BROWN, DORIS  
Address: 4132 PRINCE HALL BLVD.  
City-St-Zip: ORLANDO, FL 32811

Title: VP  
Name: GILBREATH, ALICIA  
Address: 4321 SOLOMON DRIVE  
City-St-Zip: ORLANDO, FL 32811

Title: SD  
Name: INGRAM, MARTHA  
Address: MARY CHURCH ST  
City-St-Zip: ORLANDO, FL 32811

Title: TD  
Name: MYERS, JOYCE  
Address: 3032 PINDLER COURT  
City-St-Zip: ORLANDO, FL 32811

Title: CP  
Name: ENSLOW, LEROY REV.  
Address: 3060 MARY CHURCH COURT  
City-St-Zip: ORLANDO, FL 32811

Title: PR  
Name: ENSLOW, LINDA  
Address: 3060 MARCH CHURCH COURT  
City-St-Zip: ORLANDO, FL 32811

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: JOYCVE MYERS

PRES

05/02/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date