2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N03592

1. Entity Name

RIVER ROAD ESTATES HOMEOWNERS' ASSOCIATION, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State
04-27-2000 90115 003 ****61.25

Principal Place of Business	Mailing Address
P.O. BOX 560913 ROCKLEDGE FL 32956-7913	P.O. BOX 560913 ROCKLEDGE FL 32956-0913

DO NOT WRITE IN THIS SPACE

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 59-2873775 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BURRIER, DAVID 180 RIVER ROAD CIRCLE ROCKLEDGE FL 32955	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

SIGNATURE David K. Burrier 2/26/2000
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WAYNE, ENGLAND 185 RIVER ROAD CIR ROCKLEDGE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SUSAN K. BURRIER 180 RIVER ROAD CIR ROCKLEDGE FL 32955	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BAYLISS, JON 105 RIVER ROAD CIRCLE ROCKLEDGE FL 32955	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MARK WILSON 155 RIVER ROAD CIR ROCKLEDGE FL 32955	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD MOSHER, CAROL 686 ROSSMOOR CIRCLE MELBOURNE FL 32940	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD DAVID K. BURRIER 180 RIVER ROAD CIR ROCKLEDGE FL	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAMP, GLENN P.O BOX 560471 N/A COCOA FL 32923	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WAYNE ENGLAND 185 RIVER ROAD CIR ROCKLEDGE FL 32955	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOSHER, THEODORE 165 RIVER ROAD CIRCLE ROCKLEDGE FL 32955	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONATHAN CLARK 205 RIVER ROAD CIR ROCKLEDGE FL 32955	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CAROL MOSHER 165 RIVER ROAD CIR ROCKLEDGE FL 32955	☐ Change ☒ Addition

CR2E037 (9/99)

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: SIGNATURE REQUIRED 2/26/2000 (321)631-8241
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #