2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N03592

Entity Name: RIVER ROAD ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

205 RIVER ROAD
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 560913
ROCKLEDGE, FL 329567913

New Mailing Address:

FEI Number: 59-2873775 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BAUER, KURT F
165 RIVER ROAD CIRCLE
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

ROTH, GREG A
205 RIVER ROAD CIRCLE
ROCKLEDGE, FL 32955 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: GREG A. ROTH 04/30/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	YAWN, LINDA	
Address:	135 RIVER ROAD CIRCLE	
City-St-Zip:	ROCKLEDGE, FL 32955	
Title:	D	( ) Delete
Name:	GUIGNARDI, MARIO K	
Address:	195 RIVER RD CIRCLE	
City-St-Zip:	ROCKLEDGE, FL 32955	
Title:	D	( ) Delete
Name:	WILSON, MARK	
Address:	155 RIVER ROAD CIRCLE	
City-St-Zip:	ROCKLEDGE, FL 32955	
Title:	VP	( ) Delete
Name:	CAMP, GLENN	
Address:	2296 ROCKLEDGE DR.	
City-St-Zip:	ROCKLEDGE, FL 32955	
Title:	P	( ) Delete
Name:	BAUER, KURT F	
Address:	165 RIVER ROAD CIRCLE	
City-St-Zip:	ROCKLEDGE, FL 32955	
Title:	ST	( ) Delete
Name:	ROTH, GREG	
Address:	945 BROOKVIEW LANE	
City-St-Zip:	ROCKLEDGE, FL 32955	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P	(X) Change ( ) Addition
Name:	YAWN, LYNN	
Address:	135 RIVER ROAD CIRCLE	
City-St-Zip:	ROCKLEDGE, FL 32955	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	MERRITT, RICHARD	
Address:	115 RIVER ROAD CIRCLE	
City-St-Zip:	ROCKLEDGE, FL 32955	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: GREG A. ROTH ST 04/30/2008
Electronic Signature of Signing Officer or Director — Date