

**2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Apr 14, 2005  
Secretary of State**

DOCUMENT# N04000003476

**Entity Name:** RIVER PLANTATION HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**290 N 9TH STE 201  
ST PETERSBURG, FL 33705**New Principal Place of Business:**3974 TAMPA ROAD  
SUITE B  
OLDSMAR, FL 34677**Current Mailing Address:**290 N 9TH STE 201  
ST PETERSBURG, FL 33705**New Mailing Address:**P.O. BOX 2157  
OLDSMAR, FL 34677

FEI Number: 20-2136990

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**ROLAND, DOUGLAS C  
500 E KENNEDY BLVD STE 200  
TAMPA, FL 33602 US**Name and Address of New Registered Agent:**HANSON, JACK B  
3974 TAMPA ROAD  
SUITE B  
OLDSMAR, FL 34677 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: JACK B HANSON

04/14/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: PD ( ) Delete  
Name: NEFF, RICK  
Address: 290 N 9TH ST STE 201  
City-St-Zip: ST PETERSBURG, FL 33705Title: DV ( ) Delete  
Name: ANDREWS, ED  
Address: 7402 N 56TH ST STE 480  
City-St-Zip: TAMPA, FL 33617Title: DS ( ) Delete  
Name: SCOTT, MITCH  
Address: 7402 N 56TH ST STE 480  
City-St-Zip: TAMPA, FL 33617**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JACK B HANSON

AGEN

04/14/2005

Electronic Signature of Signing Officer or Director

Date