

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003592

FILED
Jan 20, 2009
Secretary of State

Entity Name: EAGLE TRACE AT RIVER BRIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4000 S 57TH AVE
101
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

4000 S 57TH AVE
101
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 13-4289206 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLATOW, JERRY
4000 S 57 AVE
STE 101
LAKE WORTH, FL 33463 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 () Delete
Name: ROGER, HARRIS
Address: 6723 EAGLE RIDGE DR.
City-St-Zip: GREENACRES, FL 33413

Title: VD () Delete
Name: HOSTYN, PETER
Address: 221 ATLANTIC AVE
City-St-Zip: PALM BEACH, FL 33480

Title: SD () Delete
Name: HARRIS, ADA
Address: 6723 EAGLE RIDGE DR.
City-St-Zip: GREENACRES, FL 33413

Title: TD () Delete
Name: ALLEN, NICOLE
Address: 6716 EAGLERIDGE DRIVE
City-St-Zip: GREENACRES, FL 33413

Title: VD () Delete
Name: BURR, HANELORE
Address: 6672 EAGLE RIDGE DR.
City-St-Zip: GREENACRES, FL 33413

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:

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 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: ROGER HARRIS

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date