

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003955

FILED
Feb 24, 2008
Secretary of State

Entity Name: REBECCAS RAVINE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11649 REBECCA'S COVE CT.
JACKSONVILLE, FL 32223

New Principal Place of Business:

Current Mailing Address:

11649 REBECCA'S COVE CT.
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 20-1100164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBB, CHARLES PRES
11649 REBECCA'S COVE CT.
JACKSONVILLE, FL 32223 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: D () Delete
Name: COBB, CHARLES PRES
Address: 11649 REBECCA'S COVE CT.
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: GORESCHAK, BILL VP
Address: 11363 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: LEAVITT, JOHN C VP
Address: 2660 SCOTT MILL LANE
City-St-Zip: JACKSONVILLE, FL 32223

Title: D () Delete
Name: TAKACS, ELIZABETH VP
Address: 12083 RAINBOW LAKE DR.
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: GULLETT, JOHN VP
Address: 2951 COUNTRY CLUB BLVD
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SUTER, JOHN C VP
Address: 509 DANDELION DR.
City-St-Zip: JACKSONVILLE, FL 32259

Title: D (X) Change () Addition
Name: TAKACS, ELIZABETH VP
Address: 11625 REBECCA'S COVE CT.
City-St-Zip: JACKSONVILLE, FL 32223

Title: D (X) Change () Addition
Name: GULLETT, JOHN VP
Address: 11637 REBECCA'S COVE CT.
City-St-Zip: JACKSONVILLE, FL 32223

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: CHARLES G. COBB

PRES

02/24/2008

Electronic Signature of Signing Officer or Director

Date