2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001969

FILED Feb 10, 2009 Secretary of State

Entity Name: NORTH RIVER ESTATES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5310 E STATE ROAD 64 3310 US HWY 301 N

BRADENTON, FL 34208 US ELLENTON, FL 34222 US

Current Mailing Address: New Mailing Address:

5310 E STATE ROAD 64 3310 US HWY 301 N

BRADENTON, FL 34208 US ELLENTON, FL 34222 US

FEI Number: 20-2424940 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FURTH, KEN
5310 E STATE ROAD 64

NEWBY, TIMOTHY W
3310 US HWY 301 N

BRADENTON, FL 34208 US ELLENTON, FL 34222 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: TIMOTHY W. NEWBY 02/10/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: DP () Delete Title: PRES (X) Change () Addition

 Name:
 FURTH, KEN
 Name:
 NEWBY, TIMOTHY W

 Address:
 5310 E STATE ROAD 64
 Address:
 3310 US HWY 301 N

 City-St-Zip:
 BRADENTON, FL 34208 US
 City-St-Zip:
 ELLENTON, FL 34222 US

Title: DS () Delete Title: VP (X) Change () Addition

 Name:
 MILES, DAVID
 Name:
 NEWBY, TODD N

 Address:
 5310 E. STATE ROAD 64
 Address:
 3310 US HWY 301 N

 City-St-Zip:
 BRADENTON, FL 34208 US
 City-St-Zip:
 ELLENTON, FL 34222 US

Title: TREA () Change (X) Addition

 Name:
 Name:
 HAYNES, DELTON

 Address:
 Address:
 3310 US HWY 301 N

 City-St-Zip:
 City-St-Zip:
 ELLENTON, FL 34222

Title: () Delete Title: SEC () Change (X) Addition

 Name:
 Name:
 WEAVER, NATHAN

 Address:
 Address:
 3310 US HWY 301 N

 City-St-Zip:
 City-St-Zip:
 ELLENTON, FL 34222

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: TIMOTHY W. NEWBY PRES 02/10/2009