2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2008
Secretary of State

DOCUMENT# N06000004412

Entity Name: RIVER CITY RESIDENTIAL POA, INC.

Current Principal Place of Business:

5472 FIRST COAST HIGHWAY,
SUITE 13
AMELIA ISLAND, FL 32034

New Principal Place of Business:

5472 FIRST COAST HIGHWAY,
SUITE 2
AMELIA ISLAND, FL 32034

Current Mailing Address:

5472 FIRST COAST HIGHWAY,
SUITE 13
AMELIA ISLAND, FL 32034

New Mailing Address:

5472 FIRST COAST HIGHWAY,
SUITE 2
AMELIA ISLAND, FL 32034

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MOTOLAW, INC.
50 N. LAURA STREET, SUITE 2500
JACKSONVILLE, FL 32202 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: SIMMONS, VANN E
Address: 5472 FIRST COAST HIGHWAY, SUITE 13
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D ( ) Delete
Name: RICHARDSON, III, SPURGEON
Address: 5472 FIRST COAST HIGHWAY, SUITE 13
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D ( ) Delete
Name: LANIER, KENNETH B
Address: 5472 FIRST COAST HIGHWAY, SUITE 13
City-St-Zip: AMELIA ISLAND, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SIMMONS, VANN E
Address: 5472 FIRST COAST HIGHWAY, SUITE 2
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D (X) Change ( ) Addition
Name: RICHARDSON, III, SPURGEON
Address: 5472 FIRST COAST HIGHWAY, SUITE 2
City-St-Zip: AMELIA ISLAND, FL 32034

Title: D (X) Change ( ) Addition
Name: LANIER, KENNETH B
Address: 5472 FIRST COAST HIGHWAY, SUITE 2
City-St-Zip: AMELIA ISLAND, FL 32034

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: VANN E. SIMMONS D 07/08/2008

Electronic Signature of Signing Officer or Director — Date