

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000596

FILED  
Apr 03, 2009  
Secretary of State

Entity Name: OYSTER BAY AT RIVERWOOD NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

12671 WHITEHALL DRIVE  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

12671 WHITEHALL DRIVE  
SUITE 600  
FORT MYERS, FL 33907

**New Mailing Address:**

12671 WHITEHALL DRIVE  
FORT MYERS, FL 33907

FEI Number: 20-8272090

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MYERS, BRETHOLTZ & CO  
12671 WHITEHALL DRIVE  
FORT MYERS, FL 33907 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: P ( ) Delete  
Name: STAGLIANO, MARYANN  
Address: 2652 WAX MYRTLE  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: VP ( ) Delete  
Name: MCDONALD, EDWARD  
Address: 2660 WAX MYRTLE COURT  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: T ( ) Delete  
Name: MCHEECHY, DAVE  
Address: 2644 WAX MYRTLE CT.  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: S ( ) Delete  
Name: SHANNON, JANET  
Address: 2628 WAX MYRTLE CT.  
City-St-Zip: PORT CHARLOTTE, FL 33953

Title: AT ( ) Delete  
Name: RUBICKI, BONNIE  
Address: 2649 WAX MYRTLE CT.  
City-St-Zip: PORT CHARLOTTE, FL 33953

**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: AT (X) Change ( ) Addition  
Name: KUBICKI, BONNIE  
Address: 2649 WAX MYRTLE CT.  
City-St-Zip: PORT CHARLOTTE, FL 33953

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: MARYANN STAGLIANO

P

04/03/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date