

No 700 0066153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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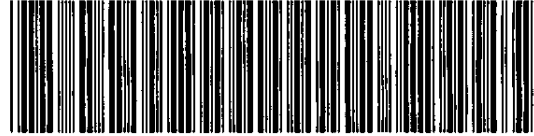
(Business Entity Name)

(Document Number)

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OCT 19 2014  
C. CARROTHERS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Riverside Heights Property Owners Assoc.  
Name of Corporation

**DOCUMENT NUMBER:** NO7000006153

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cynthia Krisko  
Name of Contact Person

R.H.P.O.A.  
Firm/Company

1419 NE Eleanor Ave.  
Address

Jensen Bch. Fla 34957  
City/State and Zip Code

CJK11198@Gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cynthia Krisko at (772) 486-1144  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Riverside Heights Property Owners Assoc.
2. The principal office address: 2425 NE LeFolia St.  
Jensen Bch. Fla 34957
3. The mailing address (if different): 1350 NE Eleanor Ave.  
Jensen Bch. Fla. 34957
4. Date of incorporation/qualification: 2007 Document number NO7000006153
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Debra Harsh  
1350 NE Eleanor Ave  
Jensen Bch. Fla 34957

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Cynthia Krisko  
1419 NE Eleanor Ave  
P.O. Box NOT acceptable  
Jensen Bch. Fla.

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Debra Harsh  
Signature of an officer or director

Debra Harsh - Sec. / Li.  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Cynthia Krisko  
Signature of Registered Agent

10/16/2015  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*