

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08781

FILED
Feb 16, 2011
Secretary of State

Entity Name: RIVERWOODS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1639 BEACH BLVD.
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 50886
JACKSONVILLE BEACH, FL 32240 US

New Mailing Address:

FEI Number: 59-2625355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVER CITY MGMT. SRVS.
1639 BEACH BLVD.
JACKSONVILLE BEACH, FL 32250 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
Name: BELGE, LARRY
Address: 4769 BEACON DRIVE W
City-St-Zip: JACKSONVILLE, FL 32225

Title: D
Name: MARSHALL, BARBARA
Address: 11510 KELVYN GROVE PLACE
City-St-Zip: JACKSONVILLE, FL 32225

Title: D
Name: HELTON, JEANNE E ESQ
Address: 11524 ASHLEY MANOR
City-St-Zip: JACKSONVILLE, FL 32225

Title: D
Name: BONDI, GAIL
Address: 11374 WOODEN ISLAND WAY
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP
Name: BIEGEL, PETER
Address: 11515 KELVYN GROVE PLACE
City-St-Zip: JACKSONVILLE, FL 32225

Title: T
Name: FRANK, AMY
Address: 11443 SWEET CHERRY LANE S
City-St-Zip: JACKSONVILLE, FL 32225

I hereby 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 all other like empowered.

SIGNATURE: STHOMPSON

RA

02/16/2011

Electronic Signature of Signing Officer or Director

Date