

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N09534** (1)

1. Corporation Name

RIO VILLA NORTH HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business

Mailing Address

571 BOLANOS CORTE
1199 S PATRICK DRIVE
INDIALANTIC FL 32903
US

RIO VILLA NORTH HOMEOWNERS ASSOCIATION
POST OFFICE BOX 33214
INDIALANTIC FL 32903-0214
US

3. Date Incorporated or Qualified

05/30/1985

3a Date of Last Report

06/23/1995

2. Principal Place of Business

2a. Mailing Address

21 **513 Velas Corte**

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Indialantic, FL**

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24 **32903**

25 **Brevard**

29

30

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HILL, CONNIE
571 BOLANOS CORTE
INDIALANTIC FL 32903

81 Name

Janice E. Meier

82 Street Address (P.O. Box Number is Not Acceptable)

513 Velas Corte

83

84 City

Indialantic, FL

FL

85 Zip Code

32903

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Janice E. Meier
Signature, typed or printed name of registered agent and title if applicable

Janice E. Meier

2/26/96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	HILL, CONNIE	
STREET ADDRESS	571 BOLANOS CORTE	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE	VPD	☐ DELETE
NAME	MEIER, JANICE	
STREET ADDRESS	513 VELAS CORTE	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE	VPD	☐ DELETE
NAME	FOREMAN, THOMAS	
STREET ADDRESS	470 VERACUZ BLVD	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE	SD	☐ DELETE
NAME	FIORI, SUSAN	
STREET ADDRESS	463 VERACUZ BLVD	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE	TD	☐ DELETE
NAME	KATEHAKIS, MARGE	
STREET ADDRESS	607 BELLA VISTA CR	
CITY-ST-ZIP	INDIALANTIC FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	Meier, Janice E.	
1.3 STREET ADDRESS	513 Velas Corte	
1.4 CITY-ST-ZIP	Indialantic, FL 32903	
2.1 TITLE	VPD	☒ Change ☐ Addition
2.2 NAME	Kuhlman, Joseph	
2.3 STREET ADDRESS	560 Veracruz Blvd	
2.4 CITY-ST-ZIP	Indialantic, FL 32903	
3.1 TITLE	VPD	☒ Change ☐ Addition
3.2 NAME	Stearns, Richard	
3.3 STREET ADDRESS	541 Rio Bello Corte	
3.4 CITY-ST-ZIP	Indialantic, FL 32903	
4.1 TITLE	SD	☐ Change ☐ Addition
4.2 NAME	Fiori, Susan	
4.3 STREET ADDRESS	463 Veracruz Blvd.	
4.4 CITY-ST-ZIP	Indialantic, FL 32903	
5.1 TITLE	TD	☒ Change ☐ Addition
5.2 NAME	Soucheck, John	
5.3 STREET ADDRESS	505 Velas Corte	
5.4 CITY-ST-ZIP	Indialantic, FL 32903	
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Janice E. Meier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Janice E. Meier, Pres.

2/26/96

401-

779-9957

Daytime Phone #

CR2E037 (12/95)