

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10785

FILED
Apr 01, 2008
Secretary of State

Entity Name: THE RIVER RIDGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

11324 RIDGE ROAD
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

11328 RIDGE ROAD, PMB #90
NEW PORT RICHEY, FL 34654

Current Mailing Address:

11324 RIDGE ROAD
NEW PORT RICHEY, FL 34654

New Mailing Address:

11328 RIDGE ROAD, PMB #90
NEW PORT RICHEY, FL 34654

FEI Number: 59-3491479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TANKEL, ROBERT L ESQUIRE
1022 MAIN STREET
DUNEDIN, FL 34698 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: PD () Delete
Name: BOYCE, M.D.
Address: 11324 RIDGE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VPSD () Delete
Name: REYNOLDS, B.J.
Address: 11324 RIDGE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: TD (X) Delete
Name: BOYCE, BRYAN
Address: 11324 RIDGE ROAD
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: BOYCE, M.D.
Address: 11328 RIDGE ROAD, PMB #90
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: VPSD (X) Change () Addition
Name: REYNOLDS, B.J.
Address: 11328 RIDGE ROAD, PMB #90
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: M. D. BOYCE

P

04/01/2008

Electronic Signature of Signing Officer or Director

Date