


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 91008 043 ****61.25

DOCUMENT # N13151

1. Entity Name
THE RIVER NORTH HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address

266 RIVER PARK DRIVE **266 RIVER PARK DRIVE**
JUPITER FL 33477 **JUPITER FL 33477**
US **US**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2629943** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

TIANO, JOSEPH
2718 27TH CT.
JUPITER FL 33477

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Joseph A. Brown* DATE **3-19-03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees** **Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	PHILLIPS, JESSIE	
STREET ADDRESS	3042 50TH CT	
CITY-ST-ZIP	JUPITER FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	PETERSON, RAY	
STREET ADDRESS	3243 32ND CT	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE	VD	<input type="checkbox"/> Delete
NAME	WRIGHT, NANCY	
STREET ADDRESS	2425 24TH CT	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE	PD	<input type="checkbox"/> Delete
NAME	TIANO, JOSEPH	
STREET ADDRESS	2718 27TH COURT	
CITY-ST-ZIP	JUPITER FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	WENZEL, LYNN	
STREET ADDRESS	15259 83RD WAY N.	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FOGEL JOSEPH	
STREET ADDRESS	2729 27th COURT	
CITY-ST-ZIP	JUPITER FL 33477	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2514 25th COURT	
STREET ADDRESS	JUPITER FL 33477	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2514 25th COURT	
CITY-ST-ZIP	JUPITER FL 33477	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Joseph A. Brown* DATE: **3-19-03**

MANUAL SIGNATURE REQUIRED

CR2E037 (10/02)