

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14190

FILED  
Apr 12, 2012  
Secretary of State

**Entity Name:** RIVER HILLS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6028 CHESTER AVE  
SUITE 105  
JACKSONVILLE, FL 32217 US

**New Principal Place of Business:**

**Current Mailing Address:**

6028 CHESTER AVE  
SUITE 105  
JACKSONVILLE, FL 32217 US

**New Mailing Address:**

**FEI Number:** 59-2931809

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BANNING MANAGEMENT, INC.  
6028 CHESTER AVE  
SUITE 105  
JACKSONVILLE, FL 32217 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: S  
Name: EDENFILED, STEVE  
Address: 1307 RIVER HILLS E # 16  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D  
Name: JORDAN (NOYES), CINDY  
Address: 1307 RIVER HILLS CIR E #13  
City-St-Zip: JACKSONVILLE, FL 32211

Title: D  
Name: BORDIERE, DORIS  
Address: 1307 RIVER HILLS CIR E # 10  
City-St-Zip: JACKSONVILLE, FL 32211

Title: TD  
Name: MANDELL, ROBERT  
Address: ALAFIA COVE DR  
City-St-Zip: RIVERVIEW, FL 33569

Title: PD  
Name: JORDAN, ALFRED  
Address: PO BOX 351318  
City-St-Zip: JACKSONVILLE, FL 32235

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: ALFRED JORDAN

PD

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date