

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14364

FILED
Feb 20, 2009
Secretary of State

Entity Name: RIVERBEND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O WORLD OF HOMES
2884 S OSCEOLA AVE
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

C/O WORLD OF HOMES
2884 S OSCEOLA AVE
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-2778930

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERDINANDSEN ENTERPRISES, INC.
2884 S OSCEOLA AVE
ORLANDO, FL 32806 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: BREWER, TIM
Address: 500 WHITE RIVER DR
City-St-Zip: ORLANDO, FL 32828 US

Title: STD () Delete
Name: MUNLEY, CATHY
Address: 12430 HARNEY DR
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: JENNINGS, CLAIRE
Address: 632 WHITE RIVER
City-St-Zip: ORLANDO, FL 32828

Title: VP () Delete
Name: LAST, DENNIS
Address: 12514 HARNEY DRIVE
City-St-Zip: ORLANDO, FL 32828

Title: D () Delete
Name: ADAMS, LESLIE
Address: 725 LALLY ROCK CT
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: TOM TEMPFER

MGR

02/20/2009

Electronic Signature of Signing Officer or Director

Date