

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16033

FILED  
May 08, 2009  
Secretary of State

**Entity Name:** RIVER CROSSING HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

N/A  
NEW PORT RICHEY, FL 346568417

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1417  
NEW PORT RICHEY, FL 346568417

**New Mailing Address:**

**FEI Number:** 59-2766120      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

WEISS, EDWARD  
6117 CALIBER COURT  
NEW PORT RICHEY, FL 34655      US

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: V      ( ) Delete  
Name: SCHWARTZ, ALLAN  
Address: 5725 DALTON CT.  
City-St-Zip: NEW PORT RICHEY, FL

Title: P      ( ) Delete  
Name: WEISS, EDWARD  
Address: 6117 CALIBER CT  
City-St-Zip: NEW PORT RICHEY, FL

Title: T      ( ) Delete  
Name: CERRETA, JOSEPH A PH.D.  
Address: 4923 DARLINGTON ROAD  
City-St-Zip: HOLIDAY, FL 34690

Title: D      ( ) Delete  
Name: GEARHART, CATHERINE  
Address: 5539 REDHAWK DR  
City-St-Zip: NEW PORT RICHEY, FL

Title: D      ( ) Delete  
Name: SHEDD, CAROL  
Address: 5906 REDHAWK DR  
City-St-Zip: NEW PORT RICHEY, FL

**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: JOSEPH A CERRETA

T

05/08/2009

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

\_\_\_\_\_  
Date