

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16033

FILED
Sep 17, 2012
Secretary of State

Entity Name: RIVER CROSSING HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

NO PHYSICAL ADDRESS
NEW PORT RICHEY, FL 34656

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1417
NEW PORT RICHEY, FL 34656

New Mailing Address:

FEI Number: 59-2766120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, ALLAN
5725 DALTON CT.
NEW PORT RICHEY, FL 34655 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: P
Name: SCHWARTZ, ALLAN
Address: 5725 DALTON CT.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: T
Name: ISALY, CHRISTIAN L
Address: 5514 CARBINE CT.
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S
Name: SHEDD, CAROL
Address: 5906 REDHAWK DR
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D
Name: GEARHART, CATHERINE
Address: 5539 REDHAWK DR
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP
Name: COCKERILL, VIRGINIA
Address: 5500 WESSON RD
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: D
Name: JOLLY, CYNTHIA
Address: 5541 WESSON RD
City-St-Zip: NEW PORT RICHEY, FL 34655

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: ALLAN SCHWARTZ

P

09/17/2012

Electronic Signature of Signing Officer or Director

Date