2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18057

FILED Apr 24, 2006 Secretary of State

Entity Name: RIVER GROVES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1451 JENNINGS LANE SOUTH 1451 S. JENNINGS LANE ROCKLEDGE, FL 32955 US ROCKLEDGE, FL 32955 US

Current Mailing Address: New Mailing Address:

1451 JENNINGS LANE SOUTH 1451 S. JENNINGS LANE ROCKLEDGE, FL 32955 US ROCKLEDGE, FL 32955 US

FEI Number: 59-2751150 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WILKIE, JUDITH E. T
1451 JENNINGS LANE S
ROCKLEDGE, FL 32955 US
WILKIE, JUDITH E. T
1451 S. JENNINGS LANE
ROCKLEDGE, FL 32955 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: JUDITH E. WILKIE 04/24/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: STEVENSON, CHUCK Name: MELANSON, GILBERT Address: 1435 N. JENNINGS LANE Address: 1440 N. JENNINGS LANE City-St-Zip: ROCKLEDGE, FL 32955

Title: DV () Delete Title: DV (X) Change () Addition

Name: QUATRONE, TONY Name: MCNUTT, CARL

Address: 1441 N. JENNINGS LN. Address: 1445 N. JENNINGS LANE City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ROCKLEDGE, FL 32955

Title: S () Delete Title: () Change () Addition

 Name:
 STEVENSON, CARLA
 Name:

 Address:
 1435 N. JENNINGS LANE
 Address:

 City-St-Zip:
 ROCKLEDGE, FL 32955
 City-St-Zip:

Name: WILKIE, JUDITH, Name: WILKIE, JUDITH,
Address: 1451 S. JENNINGS LN. Address: 1451 S. JENNINGS LAN.E

City-St-Zip: ROCKLEDGE, FL City-St-Zip: ROCKLEDGE, FL

Title: D (X) Delete Title: () Change () Addition

 Name:
 RICHARDS, JAMES L.,
 Name:

 Address:
 1433 N. JENNINGS LN.
 Address:

 City-St-Zip:
 ROCKLEDGE, FL
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 MELANSON, GILBERT,
 Name:

 Address:
 1440 N. JENNINGS LN.
 Address:

 City-St-Zip:
 ROCKLEDGE, FL
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JUDITH E. WILKIE T 04/24/2006