

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19756

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** THE RIVER AT LAKE CITY, INC.

**Current Principal Place of Business:**

629 SW SEBASTIAN CIRCLE  
LAKE CITY, FL 32024

**New Principal Place of Business:**

**Current Mailing Address:**

629 SW SEBASTIAN CIRCLE  
LAKE CITY, FL 32024

**New Mailing Address:**

**FEI Number:** 59-2893228

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RAWLINS, JAMES L  
629 SW SEBASTIAN CIRCLE  
LAKE CITY, FL 32024 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  
Name: RAWLINS, JAMES L  
Address: 629 SW SEBASTIAN CIRCLE  
City-St-Zip: LAKE CITY, FL 32024

Title: STD  
Name: RAWLINS, NEVA M  
Address: 629 SW SEBASTIAN CIRCLE  
City-St-Zip: LAKE CITY, FL 32024

Title: D  
Name: WOLF, LINDA R  
Address: 629 SW SEBASTIAN CIRCLE  
City-St-Zip: LAKE CITY, FL 32024 UN

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: JAMES L RAWLINS

PD

04/16/2012

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

\_\_\_\_\_  
Date