

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20635

**FILED**  
**Feb 07, 2010**  
**Secretary of State**

**Entity Name:** VILLAS AT RIVER OAKS HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

LAUREL BAY CIRCLE/SANDPIPER ST.  
NEW SMYRNA BEACH, FL 32169 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ATLANTIC COMM ASSOC MGMT & ACCTNG INC  
507-C HERBERT STREET  
PORT ORANGE, FL 32129 US

**New Mailing Address:**

**FEI Number:** 59-3002256      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

REIMER, R.L.  
507-C HERBERT ST.  
PORT ORANGE, FL 32129 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: ZAFUTO, BARBARA  
Address: POB 656  
City-St-Zip: NEW SMYRNA BEACH, FL 32170

Title: VPSD  
Name: COLLINS, DONALD  
Address: 722 LAUREL BAY CIRCLE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: TD  
Name: JOHNSON, MILTON  
Address: 707 SANDPIPER ST  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: MILTON JOHNSON

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02/07/2010

Electronic Signature of Signing Officer or Director

Date