

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 02, 2006 08:00 AM
Secretary of State

DOCUMENT # N20967

1. Entity Name

RIVERSIDE VILLAS OF DUNNELLOH HOMEOWNERS
ASSOCIATION, INC.



Principal Place of Business

12497 N WATER WAY #2
DUNNELLOH FL 34433
US

Mailing Address

12497 N WATER WAY #2
DUNNELLOH FL 34433
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FERNANDEZ, LINDA
20540 EAST PENNSYLVANIA AVENUE
DUNNELLOH FL 34432

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature: Type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME JAMES, FREDERICK
STREET ADDRESS 2360 NW 225TH AVE
CITY- ST- ZIP DUNNELLOH FL 34431

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS 000000415856
CITY- ST- ZIP 02/11/06-80097-024 61,25

TITLE STD ☐ Delete
NAME FERNANDEZ, LINDA
STREET ADDRESS 20540 EAST PENNSYLVANIA AVE.
CITY- ST- ZIP DUNNELLOH FL 34432

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE VPD ☐ Delete
NAME WHITE, JOAN
STREET ADDRESS 12483 N WATER WAY
CITY- ST- ZIP DUNNELLOH FL 34433

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
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NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Linda Fernandez

1-30-06 352-489-19