2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 03, 2007
Secretary of State

DOCUMENT# N22674

Entity Name: RIO RANCHES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O THOMAS F. MARTIN
5120 S.W. 114 WAY
FT. LAUDERDALE, FL 33330

New Principal Place of Business:

C/O THOMAS F. MARTIN (DECEASED)
5120 S.W. 114 WAY
FT. LAUDERDALE, FL 33330

Current Mailing Address:

C/O THOMAS F. MARTIN
5120 S.W. 114 WAY
FT. LAUDERDALE, FL 33330

New Mailing Address:

C/O DOLORES SURECK
11211 SW 49 PL.
DAVIE, FL 33330

FEI Number: 65-0213205 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MARTIN, THOMAS F
5120 S.W. 114 WAY
FT. LAUDERDALE, FL 33330 US

Name and Address of New Registered Agent:

SURECK, DOLORES H
11211 SW 49 PL.
DAVIE, FL 33330 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: DOLORES SURECK 09/03/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SKLAR, HILLARY N
Address: 11321 S.W. 49 PLACE
City-St-Zip: FT. LAUDERDALE, FL 33330

Title: SD ( ) Delete
Name: SURECK, DOLORES
Address: 11211 SW 49 PLACE
City-St-Zip: FT. LAUDERDALE, FL

Title: TD (X) Delete
Name: MARTIN, THOMAS F
Address: 5120 S.W. 114 WAY
City-St-Zip: FT. LAUDERDALE, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SKLAR, HILLARY N
Address: 11321 S.W. 49 PLACE
City-St-Zip: DAVIE, FL 33330

Title: SD/T (X) Change ( ) Addition
Name: SURECK, DOLORES
Address: 11211 SW 49 PLACE
City-St-Zip: DAVIE, FL 33330

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DOLORES SURECK S/T 09/03/2007
Electronic Signature of Signing Officer or Director Date