2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 15, 2009
Secretary of State

DOCUMENT# N28123

Entity Name: RIVER BRANCH ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5145 TURTLE CK PL
FT. PIERCE, FL 34981 US

New Principal Place of Business:

Current Mailing Address:

5145 TURTLE CK PL
FT. PIERCE, FL 34981 US

New Mailing Address:

FEI Number: 65-0160871 **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:

DAYTON, PAUL
5145 TURTLE CREEK PLACE
FT. PIERCE, FL 34981 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: D ( ) Delete
Name: PORTER, DAVID B
Address: 2201 RIVER BRANCH DRIVE
City-St-Zip: FT. PIERCE, FL 34981

Title: D ( ) Delete
Name: VANZYL, PHILIP
Address: 5148 WATERSIDE WAY
City-St-Zip: FT. PIERCE, FL

Title: D ( ) Delete
Name: TREWN, TIMOTHY
Address: 2208 RIVER BRANCH DR.
City-St-Zip: FT. PIERCE, FL

Title: D ( ) Delete
Name: DAYTON, PAUL
Address: 5145 TURTLE CREEK PL
City-St-Zip: FT PIERCE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: PAUL DAYTON D 06/15/2009
Electronic Signature of Signing Officer or Director Date