

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28797

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: WOODS OF RIVER RIDGE HOMEOWNERS' ASSOCIATION, INC.

## Current Principal Place of Business:

6710 EMBASSY BLVD  
204  
PORT RICHEY, FL 34668 US

## Current Mailing Address:

P.O. BOX 1407  
NEW PORT RICHEY, FL 34654 US

## New Principal Place of Business:

6710 EMBASSY BLVD  
206  
PORT RICHEY, FL 34668 US

## New Mailing Address:

P.O. BOX 1407  
PORT RICHEY, FL 34668 US

FEI Number: 59-3284065

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MYSZKOWIAK, MARY ANN  
6710 EMBASSY BLVD SUITE 204  
PORT RICHEY, FL 34668 US

## Name and Address of New Registered Agent:

MYSZKOWIAK, MARY ANN  
6710 EMBASSY BLVD SUITE 206  
PORT RICHEY, FL 34668 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:

03/30/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KRESHON, JOHN  
Address: 10445 COPPERWOOD  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: SD ( ) Delete  
Name: BAXTER, MARIA  
Address: 7148 SANDYWOOD CT  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: T ( ) Delete  
Name: CLARK, BRIAN  
Address: 10316 COPPERWOOD DR  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: GOLDSMITH, DEE  
Address: 6710 EMBASSY BLVD #206  
City-St-Zip: PORT RICHEY, FL 34668

Title: VD (X) Change ( ) Addition  
Name: LARSON, CONNIE  
Address: 6710 EMBASSY BLVD. #206  
City-St-Zip: PORT RICHEY, FL 34668

Title: T (X) Change ( ) Addition  
Name: CLARK, BRIAN  
Address: 6710 EMBASSY BLVD #206  
City-St-Zip: PORT RICHEY, FL 34668

Title: S ( ) Change (X) Addition  
Name: KERSHON, JOHN  
Address: 6710 EMBASSY BLVD #206  
City-St-Zip: PORT RICHEY, FL 34668

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: MARYANN MYSZKOWIAK

AGE

03/30/2009

Electronic Signature of Signing Officer or Director

Date