

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29960

FILED
Feb 10, 2009
Secretary of State

Entity Name: ROBERT'S RISE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

622 ROBERTS RISE DR
OCOE, FL 34761 US

New Principal Place of Business:

705 KELLYS COVE
OCOE, FL 34761 US

Current Mailing Address:

622 ROBERTS RISE DR
OCOE, FL 34761 US

New Mailing Address:

705 KELLYS COVE
OCOE, FL 34761 US

FEI Number: 59-2920575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RULLO, ELIZABETH R
622 ROBERTS RISE DR
OCOE, FL 34761 US

Name and Address of New Registered Agent:

CATRETT, ABBIE M
705 KELLYS COVE
OCOE, FL 34761 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: ABBIE CATRETT

02/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: RULLO, ELIZABETH R
Address: 622 ROBERTS RISE DR
City-St-Zip: OCOE, FL 34761

Title: T () Delete
Name: MCNEAL, SUSAN
Address: 613 ROBERTS RISE DR
City-St-Zip: OCOE, FL 34761

Title: D () Delete
Name: MAHOY, VICKI
Address: 609 ROBERTS RISE DR
City-St-Zip: OCOE, FL 34761

Title: D () Delete
Name: HOELSCHER, JODEE
Address: 604 ROBERTS RISE DR
City-St-Zip: OCOE, FL 34761

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: CATRETT, ABBIE M
Address: 705 KELLYS COVE
City-St-Zip: OCOE, FL 34761

Title: P (X) Change () Addition
Name: THUNBERG, BEVERLY
Address: 616 ROBERTS RISE DR
City-St-Zip: OCOE, FL 34761

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

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

Title: VP () Change (X) Addition
Name: RIEKE, SANDY
Address: 618 ROBERTS RISE DR
City-St-Zip: OCOE, FL 34761

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: ABBIE CATRETT

S

02/10/2009

Electronic Signature of Signing Officer or Director

Date