## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N30650

1. Entity Name

SIGNATURE: 仏

TWIN RIVERS PROPERTY OWNERS ASSOCIATION, INC.



FILED Apr 09, 2003 8:00 am Secretary of State

03-26-2003 90124 028 \*\*\*\*61.25

Daytime Phone

HAM HATTO THO THE CAMERO VOCORTION HOS				1					
Principal Place of Business TWIN RIVERS PROP. OWNERS ASSOCIATION POST OFFICE BOX 540062 MERRITT ISLAND FL 32952 US		Mailing Address TWIN RIVERS PROP. OWNERS ASSOCIATION POST OFFICE BOX 540062 MERRITT ISLAND FL 32952 US		\	Hario akan ahar aha ahar		7 Ilii 81811 1881		
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59-3188435 Applied For Not Applicable				
Zip Country		Zip Country			5. Certificate of Status Desired				
-	6. Name and Address of Current	Pentstered Agent		ļ	7. Name and Address of New Registered Agent				
	Name	At-ma							
BECKER, DONNA			Street A	Street Address (P.O. Box Number is Not Acceptable)					
1230 MERCEDES DRIVE MERRITT ISLAND FL 32952			10.	75	Mercides	Drive			1
	City	lerri:	H Islama	ત્ર <sup>ું</sup> F		?45 <del>0</del> _			
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 VINNA BLUSS Fraction  3/20/03									
SIGNATURE .	Signature, typed or printed name of registered agent	71:	Registered Agent signal	ne required	when reinstating)	DATE			
FILE NOW: FEE IS \$61.25  9. Election Camp Trust Fund Cor					\$5.00 May Be Added to Fees	Make Che Florida Dep	eck Payable artment of		
10. 3-7	OFFICERS AND DI	RECTORS	11.			S TO OFFICERS AND	DIRECTORS IN	N 10	1_
TITLE NAME	v Bankhead, Thad	Delete	TITLE NAME	Vice Toro	President Ian, Herb Rebecca	. 🗸	<b>⊠</b> Change	Addition	CR2E037 (10/02)
STREET ADDRESS	1220 REBECCA DR.		STREET ADDRESS						37 (
CITY-ST-ZIP	MERRITT ISLAND FL 32952		CITY-ST-ZIP		iff Island,	,FL 32952		EZ Adres-	띪
TITLE	'S Slade, Barry	Detete	TITLE		cetary Dec. Dave	S	<b>⊘</b> Change	∠ Addition	5
name Street addréss	1215 MERCEDES DR	و ديسيس د رسيس	STREET ADDRESS	1185	Rebecca	Drive -		,•	1
CITY-ST-ZIP	MERRITT ISLAND FL 32952		CITY-ST-ZIP	Merr	1)+ II(104	, FL 39952			-
-11TLE	BECKER, DONNA	Delete -	- ¥TITLE -	Treas	tin / Veranic	A	Change_	AdditIon_	1
NAME STREET AODRESS	1215 MERCEDES DR			1075	Mercedes	Drive			ĺ
CITY-ST-ZIP	MERRITT ISLAND FL 32952		CITY-ST-ZIP	Merr	itt Island	FL 32952			]
TITLE	D MAKE BOD	Delete	TITLE	Pesio	er, Steve	- D	<b>⊠</b> Change		
NAME STREET ADDRESS	MILVAE, BOB 1090 REBECCA DRIVE	•	NAME STREET ADDRESS	7161	Mercedes U	nive			}
CITY-ST-ZIP	MERRITT ISLAND FL		CITY-ST-ZIP	Merri	iff Island	EF 33425			]
TITLE	D	Delete	TITLE		ber at larg	P		✓ Addition	
NAME	JORDAN, GWEN		NAME STREET ADDRESS	7400	, Bill Merceder [		_	,	
STREET ADDRESS CITY-ST-ZIP	1200 REBECCA DR MERRITT ISLAND FL 32952		CITY-ST-ZIP	Merr	iff Island	FL 32952		·	
TITLE		☐ Delete	TITLE		····		☐ Change	■ Addition	
NAME	•	•	NAME						
STREET ADDRESS CITY-ST-ZIP	•		STREET ADDRESS  CITY ST-ZIP					:	
12 I bemby o	ertify that the information supplied with	this filing does not qualify for I	he exemption state	ted in Sec	ction 119.07(3)(i), Flo	rida Statutes. I further o	ertify that the i	nformation	į
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 attagnment with an address, with all other like empowered.									

15/4721/2010/Keronica Burns Frathin