

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35543

FILED
Apr 29, 2005
Secretary of State

Entity Name: WEKIVA RIVER OAKS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

%ROBERT J. POE
108 RIVER OAKS CIRCLE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

%ROBERT J. POE
108 RIVER OAKS CIRCLE
SANFORD, FL 32771

New Mailing Address:

FEI Number: 59-2993158

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POE, ROBERT J
108 RIVER OAKS CIRCLE
SANFORD, FL 32771 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: M () Delete
Name: POE ROBERT J,
Address: 108 RIVER OAKS CIRCLE
City-St-Zip: SANFORD, FL

Title: P () Delete
Name: HITCHINGS, GARY
Address: 172 RIVER OAKS CIRCLE
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: GUMINA, JOHN
Address: RIVER OAKS CIRCLE
City-St-Zip: SANFORD, FL 32771

Title: STD () Delete
Name: CANNONE, RICHARD M
Address: 163 RIVER OAKS CIRCLE
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: STEINBERG, LOUIS
Address: RIVER OAKS CIRCLE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: ALLEN, RON
Address: RIVER OAKS CIRCLE
City-St-Zip: SANFORD, FL 32771

Title: P (X) Change () Addition
Name: GUMINA, JOHN
Address: RIVER OAKS CIRCLE
City-St-Zip: SANFORD, FL 32771

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 for the exemption stated in Section 119.07(3)(i), 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: RICHARD M. CANNONE

STD

04/29/2005

Electronic Signature of Signing Officer or Director

Date