

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 15, 2009
Secretary of State**

DOCUMENT# N41503

Entity Name: ASSOCIATION OF ROLLING RIVER OWNERS, INC.

Current Principal Place of Business:

11555 CENTRAL PARKWAY
1103
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

11555 CENTRAL PARKWAY
1103
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 20-0976222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FIRST COAST ASSOCIATION MANAGEMENT
11555 CENTRAL PARKWAY
SUITE 801
JACKSONVILLE, FL 32224 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: FIRST COAST ASSOCIATION MANAGEMENT
Electronic Signature of Registered Agent

01/15/2009
Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: KLEIN SMITH, JASON E
Address: 11555 CENTRAL PARKWAY, 1103
City-St-Zip: JACKSONVILLE, FL 32224

Title: PRES (X) Change (X) Addition
Name: MOORE, CAROLYN
Address: 11936 ROLLING RIVER BLVD
City-St-Zip: JACKSONVILLE, FL 32219

Title: T () Delete
Name: FORD, JOHN
Address: 6726 ROLLING STREAM DR.
City-St-Zip: JACKSONVILLE, FL 32219

Title: VICE PRES (X) Change (X) Addition
Name: EBERHART, ETHELNE
Address: 6726 ROLLING STREAM DRIVE
City-St-Zip: JACKSONVILLE, FL 32219

Title: S () Delete
Name: BUCKNER, MARY
Address: 11790 DEEP SPRINGS DR S
City-St-Zip: JACKSONVILLE, FL 32219

Title: SEC (X) Change () Addition
Name: ROBINSON, GWENDOLYN T
Address: 6613 CRYSTAL RIVER ROAD
City-St-Zip: JACKSONVILLE, FL 32219

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: FIRST COAST ASSOCIATION MANAGEMENT
Electronic Signature of Signing Officer or Director

RA

01/15/2009
Date