


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2008 8:00 am
Secretary of State

02-12-2008 90009 012 ****61.25

DOCUMENT # N42525					
1. Entity Name RIVERS EDGE PROPERTY HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 1601 HUNTER CREEK DRIVE PUNTA GORDA, FL 33982		Mailing Address 1601 HUNTER CREEK DRIVE PUNTA GORDA, FL 33982			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0270978	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
WOTITZKY, EDWARD L ESQ 223 TAYLOR STREET PUNTA GORDA, FL 33950				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL Zip Code
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROUSH, ROBERT J		NAME		
STREET ADDRESS	1612 HUNTER CREEK DR		STREET ADDRESS		
CITY-ST-ZIP	PUNTA GORDA, FL 33982		CITY-ST-ZIP		
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	UPD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PEZZA, DONALD		NAME	JOANNE PICKEN	
STREET ADDRESS	1662 IBIS CT		STREET ADDRESS	1573 CONDOR DR	
CITY-ST-ZIP	PUNTA GORDA, FL 33982		CITY-ST-ZIP	PUNTA GORDA, FL 33982	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	JOHNSON, JANACE		NAME	MARICE MILLARD	
STREET ADDRESS	1584 CONDOR DRIVE		STREET ADDRESS	1606 HUNTER CREEK DR	
CITY-ST-ZIP	PUNTA GORDA, FL 33982		CITY-ST-ZIP	PUNTA GORDA, FL 33982	
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MADDY, BEVERLY		NAME		
STREET ADDRESS	1668 IBIS COURT		STREET ADDRESS		
CITY-ST-ZIP	PUNTA GORDA, FL 33982		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	DERIDDER, HOWARD		NAME	JANE RAKER	
STREET ADDRESS	1630 HUNTER CREEK ROAD		STREET ADDRESS	1692 IBIS CT	
CITY-ST-ZIP	PUNTA GORDA, FL 33982		CITY-ST-ZIP	PUNTA GORDA, FL 33982	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	PICKEN, JOANNE		NAME	JANACE JOHNSON	
STREET ADDRESS	1573 CONDOR DR		STREET ADDRESS	1584 CONDOR	
CITY-ST-ZIP	PUNTA GORDA, FL 33982		CITY-ST-ZIP	PUNTA GORDA, FL 33982	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 attachment with an address, with all other like empowered.					
SIGNATURE: <i>Robert J. Roush</i>		Date: <i>2-6-08</i>		Daytime Phone #: <i>9416312631</i>	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					