

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 26, 1999 8:00 am
Secretary of State

03-26-1999 90002 044 ****61.25

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N46321

1. Corporation Name

RIES ROAD HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

3131 RIES ROAD
LAUREL HILL FL 32567
US

Mailing Address

3131 RIES ROAD
LAUREL HILL FL 32567
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

12/05/1991

4. FEI Number

59-3100967

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

ADAMS, DEBRA
3131 RIES ROAD
LAUREL HILL FL 32567

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ADAMS, DEBRA
STREET ADDRESS 3131 RIES ROAD
CITY-ST-ZIP LAUREL HILL FL 32567 ☐ DELETE

TITLE VD
NAME ROWELL, JANICE
STREET ADDRESS 3106 REIS RD
CITY-ST-ZIP LAUREL HILL FL 32567 ☒ DELETE

TITLE STD
NAME JOORDAN, SARAH
STREET ADDRESS 3144 REIS RD
CITY-ST-ZIP LAUREL HILL FL 32567 ☐ DELETE

TITLE D
NAME STEPHENS, MIKE
STREET ADDRESS 3145 RIES ROAD
CITY-ST-ZIP LAUREL HILL FL 32567 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **Stephens, Patricia**
2.3 STREET ADDRESS **3145 RIES Rd**
2.4 CITY-ST-ZIP **Laurel Hill, FL 32567**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME **Gay, Carl**
4.3 STREET ADDRESS **3106 RIES Road**
4.4 CITY-ST-ZIP **Laurel Hill, FL 32567**

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **Castelberry, Donnie**
5.3 STREET ADDRESS **3136 RIES Rd.**
5.4 CITY-ST-ZIP **Laurel Hill, FL 32567**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Debra Adams, president** 3-23-99 (850) 652-2158

CR2E037-11/98