


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State

02-23-2005 90060 024 ****61.25

DOCUMENT # N50895	
1. Entity Name RIVER'S RIDGE HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business 1205 MANATEE AVENUE WEST BRADENTON FL 34205	Mailing Address PO BOX 14423 BRADENTON FL 34208-4423
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1st MOORE CR2E037 (10/04)

4. FEI Number 65-0391572	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HAMLIN, CURTIS D. 1205 MANATEE AVENUE WEST BRADENTON FL 34205	
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7. Name and Address of New Registered Agent	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	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
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10. OFFICERS AND DIRECTORS	
TITLE PD	<input checked="" type="checkbox"/> Delete
NAME MITCHELL, JAMES	
STREET ADDRESS 2009 84TH ST. CIR. NW	
CITY-ST-ZIP BRADENTON FL 34209	
TITLE VPD	<input checked="" type="checkbox"/> Delete
NAME ADAMS, LEE	
STREET ADDRESS 2007 84TH ST. CIR. NW	
CITY-ST-ZIP BRADENTON FL 34209	
TITLE ST	<input type="checkbox"/> Delete
NAME HANSON, GAIL	
STREET ADDRESS 2026 84TH ST. CIR NW	
CITY-ST-ZIP BRADENTON FL 34209	
TITLE S	<input type="checkbox"/> Delete
NAME HANSON, GAIL	
STREET ADDRESS 2026 84TH ST. CIR. NW	
CITY-ST-ZIP BRADENTON FL 34209	
TITLE D	<input type="checkbox"/> Delete
NAME LEUNK, RON	
STREET ADDRESS 2014 84TH ST. CIR. NW	
CITY-ST-ZIP BRADENTON FL 34209	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Gabreski, Robert	
STREET ADDRESS 2041 84th St Circle NW	
CITY-ST-ZIP Bradenton FL 34209	
TITLE V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME Patricia Krohmer	
STREET ADDRESS 2037 84th St Circle NW	
CITY-ST-ZIP Bradenton FL 34209	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 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: Gail A. Hanson Gail A. Hanson ST 2-14-05 761-2452
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #