2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

1/8

FILED
Feb 05, 2007 8:00 am
Secretary of State
01-08-2007 90242 047 ****61.25

DOCUMENT # N93000001652

1. Entity Name
RIVE ST. JOHNS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3536 UNIVERSITY BLVD BOX 169 JACKSONVILLE, FL 32277	3536 UNIVERSITY BLVD BOX 169 JACKSONVILLE, FL 32277

01052007 Chg-NP CR2E037 (12/06)

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 59-3228509 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCHENKER, STEVEN 5021 TOP ROYAL LANE JACKSONVILLE, FL 32277	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 Steven Schenker 1.5.07
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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 / NAME / STREET ADDRESS / CITY-ST-ZIP	TP SCHAET, WILLIAM 5027 RIVEBROOK CT JACKSONVILLE, FL 32277	☑ Delete	PARKS, LARRY 4709 UNIVERSITY BLVD N JACKSONVILLE, FL 32277	☑ Change ☑ Addition PRESIDENT
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TVP PARKS, LARRY 4709 UNIVERSITY BLVD N JACKSONVILLE, FL 32277	☐ Delete	~~COURSON, RYAN~~ COLLINS, TERRELL ~~4954 TOPROYAL LN~~ 5077 TOPROYAL LN JACKSONVILLE, FL 32277	☑ Change ☑ Addition VICE PRESIDENT
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TA PARKS, LARRY 4709 UNIVERSITY BLVD JACKSONVILLE, FL 32277	☑ Delete	~~MONACLE, JOHN~~ ~~4704 UNIVERSITY BLVD N.~~ ~~JACKSONVILLE, FL 32277~~	~~☑ Change ☑ Addition~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TS BATEH, DONNA 4740 UNIVERSITY BLVD N JACKSONVILLE, FL 32277	☐ Delete SECRETARY		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SCHENKER, STEVEN 5021 TOP ROYAL LANE JACKSONVILLE, FL 32277	☐ Delete TREASURER		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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: Steven Schenker 1.5.07 904.745.0236
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #