

193000005314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

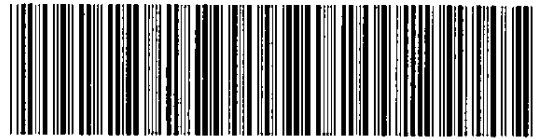
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2017 JUL -5 AM 10:11  
SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS

JUL 11 2017

TOWNHOMES OF RIVERSIDE OWNERS' ASSOCIATION, INC.

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2000 Riverside Place, Unit 7  
Wilton Manors, Florida 33305  
[madcsr@hotmail.com](mailto:madcsr@hotmail.com)  
248-877-8384

July 3, 2017

Amendment Section  
Division of Corporation  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Amendment of documents

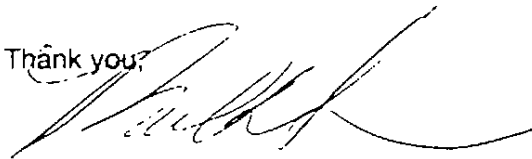
Dear Amendment Section,

Please accept the enclosed documents from Townhomes of Riverside Owners' Association, Inc. These documents would amend our Registered Agent, changing out Raymond Rideout for Matthew Dreger, our current HOA President.

Also, please change out Raymond Rideout from Treasurer/Director and replace his name with Dan Sera our new Treasurer/Director.

Enclosed is the check for \$35.00 to cover the amendment filing fee. Should you need to contact our HOA for any reason, please feel free to use the contact information above.

Thank you,



Matthew A. Dreger  
2000 Riverside Place  
Unit 7  
Wilton Manors, FL 33305

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** The Community of Riverside County Assoc. Inc.  
Assoc. Inc.

**DOCUMENT NUMBER:** NY3000005316

The enclosed **Articles of Amendment** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MATTHEW A. DECCEN  
(Name of Contact Person)

The Community of Riverside County Assoc. Inc.  
(Firm/ Company)

2001 Riverside Place, #7  
(Address)

Clinton Manors, FL 32305  
(City/ State and Zip Code)

MATTHEW@SIRCI.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MATTHEW A. DECCEN at 248 877-5354  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

2017 JUL -5 AM 10:11

RECEIVED  
DIVISION OF CORPORATIONS  
JUL 5 2017

Articles of Amendment  
to  
Articles of Incorporation  
of

The Trustees of Richmond County Assoc Inc  
(Name of Corporation as currently filed with the Florida Dept. of State)

29300005316

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

C/A  
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

Matthew A. Deane

200 Riverside Pl. Unit 7

(Florida street address)

New Registered Office Address:

Union Manor, Florida 33305  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

[Signature]  
Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action  
(Check One)

Title

Name

Address

1) ☐ Change

TD

Raymond L. Ridenour

2006 Riverside Pl

☐ Add

Unit # 5

☒ Remove

Wichita Falls, TX

55505

2) ☐ Change

TD

Doreen S. CPA

2004 Riverside Pl

☒ Add

Unit 2

☐ Remove

Wichita Falls, TX

55505

3) ☐ Change

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

☐ Add

\_\_\_\_\_

☐ Remove

\_\_\_\_\_

4) ☐ Change

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

☐ Add

\_\_\_\_\_

☐ Remove

\_\_\_\_\_

5) ☐ Change

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

☐ Add

\_\_\_\_\_

☐ Remove

\_\_\_\_\_

6) ☐ Change

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

☐ Add

\_\_\_\_\_

☐ Remove

\_\_\_\_\_

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Adoption of Amendment(s) (CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 1-13-17

Signature [Signature]  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Barbara DeGuz  
(Typed or printed name of person signing)

Member of the Board  
(Title of person signing)