

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005439

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: RIVERWOODS HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

ADVENT CHRISTIAN VILLAGE, INC  
P O BOX 4307  
DOWLING PARK, FL 32064 US

## New Principal Place of Business:

C/O ADVENT CHRISTIAN VILLAGE, INC  
10680 DOWLING PARK DRIVE  
LIVE OAK, FL 32060 US

## Current Mailing Address:

ADVENT CHRISTIAN VILLAGE INC  
P O BOX 4307  
DOWLING PARK, FL 32064 US

## New Mailing Address:

FEI Number: 59-3234013      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SCHENCK, JAMES A  
THE ADVENT CHRISTIAN VILLAGE  
C/O THE ADVENT CHRISTIAN VILLAGE, INC.  
DOWLING PARK, FL 32060 US

## Name and Address of New Registered Agent:

SCHENCK, JAMES A  
C/O ADVENT CHRISTIAN VILLAGE  
10680 DOWLING PARK DRIVE  
LIVE OAK, FL 32060 US

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.

SIGNATURE: \_\_\_\_\_

04/17/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HUMBLE, JAMES L  
Address: 10209 229TH LANE  
City-St-Zip: LIVE OAK, FL 32060

Title: VD ( ) Delete  
Name: SCHENCK, JAMES A  
Address: 23133 100TH STREET  
City-St-Zip: LIVE OAK, FL 32060

Title: STD ( ) Delete  
Name: HETT, STEVEN  
Address: 22727 104TH STREETX  
City-St-Zip: LIVE OAK, FL 32060

Title: D ( ) Delete  
Name: CARTER, CRAIG  
Address: 11057 CR 136  
City-St-Zip: LIVE OAK, FL 32060

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CARTER, CRAIG  
Address: 10081 COUNTY ROAD 136  
City-St-Zip: LIVE OAK, FL 32060

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: HETT, STEVEN  
Address: 22727 104TH STREET  
City-St-Zip: LIVE OAK, FL 32060

Title: D (X) Change ( ) Addition  
Name: THOMPSON, ANN  
Address: 10454 WILDWOOD DRIVE  
City-St-Zip: LIVE OAK, FL 32060

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG CARTER

PD

04/17/2009

Electronic Signature of Signing Officer or Director

Date