

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003222

FILED
Jan 12, 2012
Secretary of State

Entity Name: ST. MARKS RIVER'S EDGE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

215 MORIAH CREEK ROAD
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

215 MORIAH CREEK ROAD
CRAWFORDVILLE, FL 32327

New Mailing Address:

FEI Number: 59-3360481

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLES, RAY
215 MORIAH CREEK RD
CRAWFORDVILLE, FL 32327 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BOLES, RAY
Address: PO BOX 966
City-St-Zip: CRAWFORDVILLE, FL 32326

Title: VPD
Name: PRUITT, MIKE
Address: PO BOX 153
City-St-Zip: ST. MARKS, FL 32355

Title: SD
Name: GLENDA, PRUITT
Address: PO BOX 153
City-St-Zip: ST MARKS, FL 32355

Title: TD
Name: BOLES, LINDA
Address: PO BOX 966
City-St-Zip: CRAWFORDVILLE, FL 32326

I hereby 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 all other like empowered.

SIGNATURE: LINDA BOLES

TD

01/12/2012

Electronic Signature of Signing Officer or Director

Date