


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 8:00 am
Secretary of State

01-25-2006 90034 044 ****61.25

| | | | | | |
|--|--|--|---|---|---|
| DOCUMENT # N94000005212 1. Entity Name RIVER OAKS II CONDOMINIUM ASSOCIATION, INC. | | | |  | |
| Principal Place of Business RIVER VILLAGE DRIVE DEBARY, FL 32713 US | | | Mailing Address PO BOX 7149 DAYTONA BEACH, FL 32116-7149 US | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | | |
| 6. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent | |
| KING, JOAN 160 KEY COLONY COURT DAYTONA BEACH SHORES, FL 32118 | | | | Name <u>Vicki Jank</u> Street Address (P.O. Box Number is Not Acceptable) <u>41 Seahaven Drive</u> City <u>Ponce Inlet</u> FL Zip Code <u>32127</u> | |
| 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 <u>Vicki Jank C.A.M.</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | <u>Vicki Jank</u> <small>(NOTE: Registered Agent signature required when reinstating)</small> | | <u>1/21/06</u> <small>DATE</small> | |
| Filing Fee is \$61.25 Due by May 1, 2006 | | 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 | | | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P ALEMANY, JOSEPH 237 RIVER VILLAGE DR DEBARY, FL 32713 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DYE, LISA 244 RIVER OAKS LANDING DEBARY, FL 32713 <input checked="" type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Frank Dragoun 130 River Village Drive DeBary, FL 32713 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GRIFFITHS, ALICE 228 RIVER VILLAGE DR DEBARY, FL 32713 <input checked="" type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Harvey Schefsky 139 River Village Drive DeBary, FL 32713 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Joseph A. Alemany</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | <u>1-17-06</u> <small>Date</small> | | <u>386 753-1758</u> <small>Daytime Phone #</small> |

Joseph Alemany