

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2008 08:00 A
Secretary of State

DOCUMENT # N95000005738

1. Entity Name
**RIVER OAKS LANDING HOMEOWNERS ASSOCIATION,
INC.**



Principal Place of Business
**10999 PIPING ROCK CIRCLE
ORLANDO, FL 32817**

Mailing Address
**P.O. BOX 677698
ORLANDO, FL 32817 US**



01082008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3288205

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WOOTEN, JAMES C
10862 PIPING ROCK CIRCLE
ORLANDO, FL 32817**

**DO NOT WRITE
IN THIS SPACE**

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 _____

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, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000855580
03/27/08-80055-024 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P STRAUB, CHRIS 2625 STANMORE CT ORLANDO, FL 32817
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DEVOSE, STEVE 10825 PIPING ROCK CIR ORLANDO, FL 32817
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WOOTEN, JAMES C 10862 PIPING ROCK CIRCLE ORLANDO, FL 32817
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PULIDO, LUCIA 2612 STANMORE COURT ORLANDO, FL 32817
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FLUNO, PATRICIA 10861 PIPING ROCK CIR ORLANDO, FL 32817
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

James C. Wooten HOA Treasurer

03/10/2008 407-207-5882

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #