2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State
04-09-2008 90033 031 ****61.25

DOCUMENT # N96000001237

1. Entity Name
RIVER OAKS OWNERS ASSOCIATION, INC.

40063070

Principal Place of Business	Mailing Address
4003 HARTLEY RD. JACKSONVILLE, FL 32257 US	4003 HARTLEY RD. JACKSONVILLE, FL 32257 US

01072008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3392788 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SIGNATURE REALTY AND MANAGEMENT INC.
4003 HARTLEY RD.
JACKSONVILLE, FL 32257

7. Name and Address of New Registered Agent

Name Bryan Cantrell
Street Address (P.O. Box Number is Not Acceptable) Signature Realty and Management, Inc.
4003 Hartley Road
City Jacksonville FL Zip Code 32257

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 Bryan Cantrell 1/16/2008
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

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	DT CONE, MARTIN 1756 SINGING BIRD LN. JACKSONVILLE, FL 32223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT CAMP, MARIE 1203 RIVER PLANTATION DR JACKSONVILLE, FL 32223	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HIGGINBOTHAM, ROBERT 12036 RIVER PLANTATION DRIVE JACKSONVILLE, FL 32223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP HIGGINBOTHAM, ROBERT 12036 RIVER PLANTATION DR JACKSONVILLE FL 32223	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP KUMMER, SANDY 12061 RISING OAKS DR JACKSONVILLE, FL 32223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP KUMMER, SANDY 1768 RIVER PLANTATION DR JACKSONVILLE, FL 32223	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS OQUINN, APRIL 12036 MASSIVE OAKS COURT JACKSONVILLE, FL 32223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS HERNDON, LINDA 12064 RISING OAKS CT JACKSONVILLE FL 32223	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DYP HAWKEY, BILL 1758 RISING OAKS DRIVE JACKSONVILLE, FL 32223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAWKEY, NANCY 1758 RISING OAKS DR JACKSONVILLE, FL 32223	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MILLER, ROBERT 12076 RIVER PLANTATION DR JACKSONVILLE, FL 32223	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: [signature] April 3, 2008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #