

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90012 021 ****61.25

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1. Entity Name

RIVENDELL UNIT 1 NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business

2477 STICKNEY POINT RD.
STE. 118A
SARASOTA FL 34231

Mailing Address

2477 STICKNEY POINT RD.
STE. 118A
SARASOTA FL 34231

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0653288

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARGUS PROPERTY MGMT., INC.
2477 STICKNEY POINT RD.
STE. 118A
SARASOTA FL 34231

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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 ☐ Delete
NAME **VD**
STREET ADDRESS **BLY, GEORGE**
CITY-ST-ZIP **545 MEADOWSWEET CR**
OSPREY FL 34229

TITLE ☒ Change ☐ Addition
NAME **PD**
STREET ADDRESS **BLY, CHUCK**
CITY-ST-ZIP

TITLE ☒ Delete
NAME **PD**
STREET ADDRESS **ALARIE, KEN**
CITY-ST-ZIP **570 MEADOW SWEET CIRCLE**
OSPREY FL 34229

TITLE ☐ Change ☐ Addition
NAME **RICHARD PEARMAN**
STREET ADDRESS **537 MEADOW SWEET CIRCLE**
CITY-ST-ZIP **OSPREY FL 34229**

TITLE ☒ Delete
NAME **SD**
STREET ADDRESS **PARKER, JAMES**
CITY-ST-ZIP **498 MEADOW SWEET CIRCLE**
OSPREY FL 34229

TITLE ☐ Change ☐ Addition
NAME **VD**
STREET ADDRESS **ROBERT STALLATO**
CITY-ST-ZIP **506 MEADOW SWEET CIRCLE**
OSPREY FL 34229

TITLE ☐ Delete
NAME **TD**
STREET ADDRESS **ARENDT, MARGERY**
CITY-ST-ZIP **516 MEADOW SWEET CIRCLE**
OSPREY FL 34229

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME **D**
STREET ADDRESS **BEHANNA, CLYDE**
CITY-ST-ZIP **490 MEADOW SWEET CIRCLE**
OSPREY FL 34229

TITLE ☐ Change ☐ Addition
NAME **PS**
STREET ADDRESS **MILLER, JOANNE**
CITY-ST-ZIP **490 MEADOW SWEET CIRCLE**
OSPREY FL 34229

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Margery Arendt