

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006483

FILED  
Jan 12, 2012  
Secretary of State

**Entity Name:** RICHFIELD HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

901 N. LAKE DESTINY DRIVE  
SUITE 110  
MAITLAND, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

901 N. LAKE DESTINY DRIVE  
SUITE 110  
MAITLAND, FL 32751 US

**New Mailing Address:**

**FEI Number:** 59-2229128

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WEBB, ROBIN L  
901 N. LAKE DESTINY DRIVE  
SUITE 110  
MAITLAND, FL 32751 US

**Name and Address of New Registered Agent:**

RUBIN, DUFF  
901 N. LAKE DESTINY DRIVE  
SUITE 110  
MAITLAND, FL 32751 US

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: DUFF RUBIN

01/12/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HARVEY, DENNIS  
Address: 901 N. LAKE DESTINY DRIVE, STE 110  
City-St-Zip: MAITLAND, FL 32751

Title: VP  
Name: HINDEN, GARY  
Address: 901 N. LAKE DESTINY DRIVE, STE 110  
City-St-Zip: MAITLAND, FL 32751

Title: T  
Name: BROWN, CAROLYN  
Address: 901 N. LAKE DESTINY DRIVE, STE 110  
City-St-Zip: MAITLAND, FL 32751

Title: SEC  
Name: MALDONADO, LYDIA  
Address: 901 N. LAKE DESTINY DRIVE, STE 110  
City-St-Zip: MAITLAND, FL 32751

Title: D  
Name: BOWSER, ODESSA  
Address: 901 N. LAKE DESTINY DRIVE, STE 110  
City-St-Zip: MAITLAND, FL 32751

Title: D  
Name: KNOPP, DAVID  
Address: 901 N. LAKE DESTINY DRIVE, STE 110  
City-St-Zip: MAITLAND, FL 32751

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: MILDRED MERCED

COMP

01/12/2012

Electronic Signature of Signing Officer or Director

Date