

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07380

FILED
Mar 13, 2009
Secretary of State

Entity Name: RIVER OAKS PROPERTIES, INC.

Current Principal Place of Business:

20 TRAFALGAR SQUARE
STE 602
NASHUA, NH 03063 US

New Principal Place of Business:

Current Mailing Address:

2476 N ESSEX AVE
HERNANDO, FL 34442 US

New Mailing Address:

FEI Number: 02-0391050 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABEL, ERIC D ESQUIRE
2476 N ESSEX AVENUE
HERNANDO, FL 34442 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOTE REALTY L.L.C.
Address: C/O 20TRAFALGAR SQ., STE#602
City-St-Zip: NASHUA, NH 03063

Title: D () Delete
Name: STELLOS-MALVERS, CASSANDRA
Address: C/O 20 TRAFALGAR SQ., STE #602
City-St-Zip: NASHUA, NH 03063

Title: P () Delete
Name: TAMPOSI, STEPHEN A.
Address: 2476 N ESSEX AVENUE
City-St-Zip: HERNANDO, FL 34442

Title: ST () Delete
Name: PASTOR, JOHN E.
Address: 2476 N ESSEX AVENUE
City-St-Zip: HERNANDO, FL 34442

Title: D () Delete
Name: STELLOS-COLORUSSO, MELANIE
Address: 20 TRAFALGAR SQUARE, STE. 602
City-St-Zip: NASHUA, NH 03063

Title: D () Delete
Name: STELLOS, ALYSON
Address: C/O 20 TRAFALGAR SQ., #602
City-St-Zip: NASHUA, NH 03063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN A. TAMPOSI

PRES

03/13/2009

Electronic Signature of Signing Officer or Director

_____ Date