2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2014
Secretary of State
CC8663324884

DOCUMENT# 715001

Entity Name: RIVER OAKS COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

5205 S. ORANGE AVENUE
BOX 19
ORLANDO, FL 32809

Current Mailing Address:

5205 S. ORANGE AVENUE
BOX 19
ORLANDO, FL 32809

FEI Number: 59-2030685

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TINA , DEMONSTENE
5106 LEEWARD WAY
ORLANDO, FL 32809 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: TINA DEMONSTENE 03/25/2014

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	VP, DIRECTOR
Name	MUNOZ, DANIEL
Address	5089 THE OAKS CR
City-State-Zip:	ORLANDO FL 32809

Title	SECRETARY, DIRECTOR
Name	DEMONSTENE , TINA
Address	5106 LEEWARD WAY
City-State-Zip:	ORLANDO FL 32809

Title	DIRECTOR
Name	ZABLE, TERRENCE
Address	5073 THE OAKS CR
City-State-Zip:	ORLANDO FL 32809

Title	DIRECTOR
Name	MARTIN, AIDA
Address	5127 LEEWARD WAY
City-State-Zip:	ORLANDO FL 32809

Title	PRESIDENT, DIRECTOR
Name	ROCHEFORD, CHAD A
Address	428 HARBOUR ISLAND RD
City-State-Zip:	ORLANDO FL 32809

Title	TREASURER, SECRETARY
Name	PRENTICE, RONALD
Address	5060 THE OAKS CR.
City-State-Zip:	ORLANDO FL 32809

Title	DIRECTOR
Name	DEMOSTENE, TINA
Address	5106 LEEWARD WAY
City-State-Zip:	ORLANDO FL 32809

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: TINA DEMOSTENE 03/25/2014

Electronic Signature of Signing Officer/Director Detail — Date