## 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 764589** 

Entity Name: RIVER OAKS CONDOMINIUM IV ASSOCIATION, INC.

**FILED** Feb 12, 2025 **Secretary of State** 7911091432CC

## **Current Principal Place of Business:**

5113 PURITAN CIRCLE TAMPA, FL 33617

## **Current Mailing Address:**

C/O BLUE RIBBON PROPERTY MANAGEMENT 2406 STATE RD 60E #1383 VALRICO, FL 33595 US

FEI Number: 59-2232560 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BALDERSTON, RICHARD 1806 S RIDGE DRIVE VALRICO, FL 33594 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: RICHARD BALDERSTON 02/12/2025

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **SECRETARY** 

Name STATZ, DENNIS Name BALDERSTON, LOUIS

Address C/O BLUE RIBBON PROPERTY Address C/O BLUE RIBBON PROPERTY MANAGEMENT

MANAGEMENT

2406 STATE RD 60E #1383 2406 STATE RD 60E #1383

VALRICO FL 33595 VALRICO FL 33595 City-State-Zip: City-State-Zip:

Title **TREASURER** Title **DIRECTOR** 

THOMPSON, MICHAEL Name GEISLER, ANTHONY Name

C/O BLUE RIBBON PROPERTY C/O BLUE RIBBON PROPERTY Address Address MANAGEMENT

MANAGEMENT

2406 STATE RD 60E #1383 2406 STATE RD 60E #1383

City-State-Zip: VALRICO FL 33595 City-State-Zip: VALRICO FL 33595

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.

02/12/2025 SIGNATURE: DENNIS STATZ **PRESIDENT**