

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 766216

**Entity Name:** RIVERWOODS PLANTATION RV RESORT CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 14, 2020**  
**Secretary of State**  
**0844842831CC**

**Current Principal Place of Business:**

4600 ROBERT E. LEE BLVD.  
ESTERO, FL 33928

**Current Mailing Address:**

4600 ROBERT E. LEE BLVD.  
ESTERO, FL 33928

**FEI Number: 59-2449892**

**Certificate of Status Desired: No**

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

BECKER & POLIAKOFF, P.A.  
12140 CARISSA COMMERCE COURT  
#200  
FT MYERS, FL 33966 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            BOAL, PHILLIP  
Address        20021 CUMBERLAND CT.  
City-State-Zip: ESTERO FL 33928

Title            S  
Name            CARR, WILLIAM  
Address        20380 CARRIAGE COURT  
City-State-Zip: ESTERO FL 33928

Title            D  
Name            CREECH, CURT  
Address        20441 CUMBERLAND COURT  
City-State-Zip: ESTERO FL 33928

Title            VP  
Name            SMITH, MICHAEL  
Address        4551 LINCOLN LANE EAST  
City-State-Zip: ESTERO FL 33928

Title            TREASURER  
Name            AYERS, STEVE  
Address        4670 SLASHPINE WAY WEST  
City-State-Zip: ESTERO FL 33928

Title            DIRECTOR  
Name            STANGLER, STANLEY  
Address        4600 SLASHPINE EAST  
City-State-Zip: ESTERO FL 33928

Title            DIRECTOR  
Name            THAXTON , SUE  
Address        4731 BAYBERRY WAY WEST  
City-State-Zip: ESTERO FL 33928

*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: PHILLIP BOAL**

**PRESIDENT**

**01/14/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date