## 2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N02000000240

Entity Name: RIVERCREST COMMUNITY ASSOCIATION, INC.

FILED
Dec 08, 2015
Secretary of State
CC6032468482

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

17824 N US HIGHWAY 41 LUTZ, FL 33549

## **Current Mailing Address:**

C/O WISE PROPERTY MANAGEMENT INC 17824 N US HIGHWAY 41 LUTZ, FL 33549 US

FEI Number: 04-3626900 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GLAUSIER, CHARLES EVANS ESQ. 1801 N. HIGHLAND AVE TAMPA, FL 33602 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: CHARLES EVANS GLAUSIER 12/08/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title DIRECTOR

Name RYAN, MICHAEL Name VELLA, DON JR.

Address 17824 N US HIGHWAY 41 Address 17824 N US HIGHWAY 41

City-State-Zip: LUTZ FL 33549 City-State-Zip: LUTZ FL 33549

TitleDIRECTORTitleVP, DIRECTORNameMCGEE, JOENameFERNANDEZ, LISA

Address 17824 N US HIGHWAY 41 Address 17824 N US HIGHWAY 41

City-State-Zip: LUTZ FL 33549 City-State-Zip: LUTZ FL 33549

TitleDIRECTOR, SECRETARYTitleTREASURER, DIRECTORNameSTEVENS, MARSHANameHAILE, MALCOLM SR.Address17824 N US HIGHWAY 41Address17824 N US HIGHWAY 41

City-State-Zip: LUTZ FL 33549 City-State-Zip: LUTZ FL 33549

Title DIRECTOR

Name THOMPSON, SAMANTHA
Address 17824 N US HIGHWAY 41

City-State-Zip: LUTZ FL 33549

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: MICHAEL RYAN PRESIDENT 12/08/2015