

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011792

**Entity Name:** RIVERCREST ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

501 BAY CITY ROAD  
OPTIONAL  
APALACHICOLA, FL 32320

**Current Mailing Address:**

PO BOX 397  
OPTIONAL  
APALACHICOLA, FL 32329

**FEI Number:** 20-5989018

**Certificate of Status Desired:** No

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

AUTREY, WALTER GJR  
1 SCIPIO CREEK DRIVE  
APALACHICOLA, FL 32320 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            DPS  
Name            BLAYLOCK, DEWEY  
Address        602 MONUMENT AVE.  
City-State-Zip: PORT ST. JOE FL 32456

Title            DV  
Name            SINEATH, JAMES B  
Address        2410 ANDOVER DR.  
City-State-Zip: VALDOSTA GA 31602

Title            DST  
Name            AUTREY, WALTER GJR  
Address        1 SCIPIO CREEK DRIVE  
City-State-Zip: APALACHICOLA FL 32320

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:** WALTER G. AUTREY,JR.

**SECRETARY/TREASURER** 01/16/2013

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

\_\_\_\_\_  
Date