

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000011246

**Entity Name:** MYAKKA RIVER MOTORCOACH RESORT OWNERS ASSOCIATION, INC.

**FILED**  
**Mar 23, 2023**  
**Secretary of State**  
**3358605233CC**

**Current Principal Place of Business:**

14100 MYAKKA AVENUE  
PORT CHARLOTTE, FL 33953

**Current Mailing Address:**

14100 MYAKKA AVENUE  
PORT CHARLOTTE, FL 33953

**FEI Number: 46-1958478**

**Certificate of Status Desired: Yes**

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

BRANN, RONALD  
14100 MYAKKA AVE  
LOT #101  
PORT CHARLOTTE, FL 33953 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: RONALD BRANN**

**03/23/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            RITCHIE, DENNIS  
Address        14100 MYAKKA AVENUE  
                  LOT #25  
City-State-Zip: PORT CHARLOTTE FL 33953

Title            TREASURER, DIRECTOR  
Name            POORMAN , MIKE  
Address        14100 MYAKKA AVENUE  
                  LOT #2  
City-State-Zip: PORT CHARLOTTE FL 33953

Title            VP, DIRECTOR  
Name            COCHRAN, ROGER  
Address        14100 MYAKKA AVE  
                  LOT#4  
City-State-Zip: PORT CHARLOTTE FL 33953

Title            DIRECTOR  
Name            MEYER, RICK  
Address        14100 MYAKKA AVE  
                  LOT # 34  
City-State-Zip: PORT CHARLOTTE FL 33953

Title            SECRETARY, DIRECTOR  
Name            LAWYER, CHARLOTTE  
Address        14100 MYAKKA AVE  
                  LOT # 69  
City-State-Zip: PORT CHARLOTTE FL 33953

*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: MIKE POORMAN**

**TREASURER, DIRECTOR    03/23/2023**

Electronic Signature of Signing Officer/Director Detail

Date