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 unde	r
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 appea	ars
above, or on an attachment with all other like empowered.	

SIGNATURE: BRENDA J ANDERSON

I

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail :					
Title	D,P	Title	D,T		
Name	PERANDO, RANDELL W	Name	ANDERSON, BRENDA		
Address	11960 SW 230TH AVE	Address	22785 SW 117TH PLACE RD		
City-State-Zip:	DUNNELLON FL 34431	City-State-Zip:	DUNNELLON FL 34431		
Title	D.S				
THE	0,5				
Name	DELLINGER, PAUL D				
Address	22713 SW 117TH PLACE RD				
City-State-Zip:	DUNNELLON FL 34431				

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:

ANDERSON, BRENDA J 22785 SW 117TH PLACE RD DUNNELLON, FL 34431 US

22785 SW 117TH PLACE RD DUNNELLON, FL 34431

Current Principal Place of Business:

Current Mailing Address:

22785 SW 117TH PLACE RD DUNNELLON, FL 34431 US

FEI Number: 92-0443402

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N22000010587

Entity Name: RIVER RETREATS HOMEOWNERS ASSOCIATION, INC

FILED Mar 21, 2023 Secretary of State 8246287995CC

Certificate of Status Desired: No

03/21/2023

Date

Date

TREASURER