

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25113

Entity Name: NEW RIVER ESTATES HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**1356 SW 151ST WAY
SUNRISE, FL 33326**Current Mailing Address:**PO BOX 266361
WESTON, FL 33326 US**FEI Number:** 65-0080581**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LA ROCCA, JAMES
1356 SW 151ST WAY
SUNRISE, FL 33326 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:** JAMES LA ROCCA

03/16/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LA ROCCA, JAMES
Address 1356 SW 151ST WAY
City-State-Zip: SUNRISE FL 33326

Title SECRETARY
Name REATO, PAUL
Address 1364 SW 151ST WAY
City-State-Zip: SUNRISE FL 33326

Title DIRECTOR
Name STRACQUADAIN, RAYMOND
Address 15140 SW 13TH PLACE
City-State-Zip: SUNRISE FL 33326

Title DIRECTOR
Name BIONDO, ROBERT
Address 1360 SW 151ST WAY
City-State-Zip: SUNRISE FL 33326

Title TREASURER
Name CAVALIE, NANCY
Address 1321 SW 151ST WAY
City-State-Zip: SUNRISE FL 33326

Title DIRECTOR
Name HENRY, LEONOR
Address 15009 SW 13TH COURT
City-State-Zip: SUNRISE FL 33326

Title VP
Name ISRAEL, SAMMY
Address 1368 SW 151ST WAY
City-State-Zip: SUNRISE FL 33326

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: NANCY R. CAVALIE

TREASURER

03/16/2018

Electronic Signature of Signing Officer/Director Detail

Date