

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41503

Entity Name: ASSOCIATION OF ROLLING RIVER OWNERS, INC.

Current Principal Place of Business:

550 BALMORAL CIRCLE N., SUITE # 305
JACKSONVILLE, FL 32218

Current Mailing Address:

550 BALMORAL CIRCLE N., SUITE # 305
JACKSONVILLE, FL 32218 US

FEI Number: 20-0976222

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

J&L MANAGEMENT OF NORTH, FL INC
550 BALMORAL CIRCLE N., SUITE # 305
JACKSONVILLE, FL 32218 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 LONG

01/13/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WARDS, JUDY
Address 550 BALMORAL CIRCLE N., SUITE #
 305
City-State-Zip: JACKSONVILLE FL 32218

Title VP
Name NASH, CRAIG
Address 550 BALMORAL CIRCLE N., SUITE #
 305
City-State-Zip: JACKSONVILLE FL 32218

Title OFFICER
Name GOMILLION, DENISE
Address 550 BALMORAL CIRCLE N., SUITE #
 305
City-State-Zip: JACKSONVILLE FL 32218

Title OFFICER
Name RONALD REVELS
Address 550 BALMORAL CIRCLE N., SUITE #
 305
City-State-Zip: JACKSONVILLE FL 32218

Title SECRETARY
Name GWENDOLYN BROOKS-MARSHALL
Address 550 BALMORAL CIRCLE N., SUITE #
 305
City-State-Zip: JACKSONVILLE FL 32218

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: JUDY WARDS

PRESIDENT

01/13/2014

Electronic Signature of Signing Officer/Director Detail

Date