

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756193

FILED  
May 04, 2010  
Secretary of State

**Entity Name:** RIVER BLUFF CONDOMINIUM ASSOCIATION OF MELBOURNE, INC.

**Current Principal Place of Business:**

441 N. HARBOR CITY BLVD  
OFFICE  
MELBOURNE, FL 32935

**New Principal Place of Business:**

1978 US 1  
SUITE 106  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

1978 US 1 SUITE 106  
ROCKLEDGE, FL 32955

**New Mailing Address:**

1978 US 1  
SUITE 106  
ROCKLEDGE, FL 32955

**FEI Number:** 59-2252530      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

COLOMBO, JOSEPH G  
2351 W EAU GALLIE BLVD  
MELBOURNE, FL 32935    US

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

ADVANCED PROPERTY MANAGEMENT, INC  
1978 US 1  
SUITE 106  
ROCKLEDGE, FL 32955 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: VAN MOORE

05/04/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD  
Name: NOLL, GERALD  
Address: 441 N HARBOR CITY BLVD #C7  
City-St-Zip: MELBOURNE, FL 32935

Title: SD  
Name: GOODE, HENRY  
Address: 411 N. HARBOR CITY BLVD. #D-5  
City-St-Zip: MELBOURNE, FL 32935

Title: VD  
Name: FRIED, HOWARD  
Address: 441 N HARBOR CITY BLVD #D4  
City-St-Zip: MELBOURNE, FL 32935

Title: PD  
Name: AVERILL, SUSAN  
Address: 441 N HARBOR CITY BLVD #D-3  
City-St-Zip: MELBOURNE, FL 32935

Title: D  
Name: CELI, MICHAEL  
Address: 441 N. HARBOR CITY BLVD C-9  
City-St-Zip: MELBOURNE, FL 32935

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: VAN MOORE

RA

05/04/2010

Electronic Signature of Signing Officer or Director

Date