2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07630

FILED Jan 0<u>2, 200</u>8 Secretary of State

Entity Name: RIVERSIDE CONDOMINIUM ASSOCIATION OF DEBARY, INC.

Current Principal Place of Business: New Principal Place of Business:

1247 SOUTH VOLUSIA AVE 313 DIRKSEN DRIVE

ORANGE CITY, FL 32763 UNIT Z1

DEBARY, FL 32713 US

Current Mailing Address: New Mailing Address:

1247 SOUTH VOLUSIA AVE 313 DIRKSEN DRIVE ORANGE CITY, FL 32763 US

UNIT Z1

DEBARY, FL 32713 US

FEI Number: 95-4159807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STURGES, BRENDA A FOROSTOSKI, NICOLE 1247 SOUTH VOLUSIA AVE 313 DIRKSEN DRIVE ORANGE CITY, FL 32763 UNIT B11

DEBARY, FL 32713 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: NICOLE FOROSTOSKI 01/02/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

MCKEE, LYNN MCKEE, LYNN Name: Name: 313 DIRKSEN DR #A-5 Address: 313 DIRKSEN DR #A5 Address: City-St-Zip: DEBARY, FL 32713 City-St-Zip: DEBARY, FL 32713

Title: () Delete Title: (X) Change () Addition GARRETT, JUDITH Name: ADAM, CAIRO Name:

Address: 313 DIRKSEN DR #B2 Address: 943 PRESCOTT BLVD City-St-Zip: DEBARY, FL 32713 City-St-Zip: DELTONA, FL 32738

Title: () Delete Title: (X) Change () Addition

HARGER, DEBRA BRENDA, YORK Name: Name: 313 DIRKSEN DR #B8 313 DIRKSEN DR #F6 Address: Address: City-St-Zip: DEBARY, FL 32713 City-St-Zip: DEBARY, FL 32713

Title: () Delete Title: AS () Change (X) Addition

Name: Name: NICOLE, FOROSTOSKI 313 DIRKSEN DRIVE #B11 Address: Address: City-St-Zip: City-St-Zip: DEBARY, FL 32713

Title: () Delete Title: () Change (X) Addition

MARY JO, REYNOLDS Name: Name: 313 DIRKSEN DRIVE #C6 Address: Address: City-St-Zip: City-St-Zip: DEBARY, FL 32713

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NICOLE FOROSTOSKI AS 01/02/2008