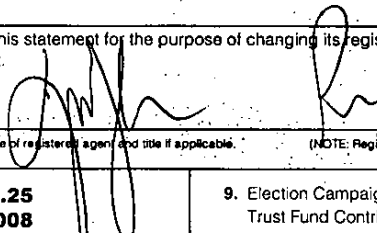
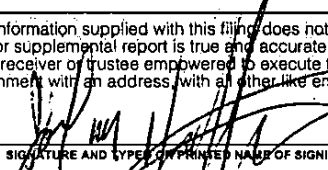


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90116 049 ****61.25

DOCUMENT # N33220 1. Entity Name RIVIERA HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 5609 US 19 STE E NEW PORT RICHEY, FL 34652 US			Mailing Address 5609 US 19 STE E NEW PORT RICHEY, FL 34652 US		
2. Principal Place of Business - No P.O. Box # 5837 Trable Creek Rd.		3. Mailing Address 5837 Trable Creek Rd.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State New Port Richey, FL		City & State New Port Richey, FL		4. FEI Number 59-2961492	
Zip 34652		Country USA		Applied For Not Applicable	
5. Certificate of Status Desired. ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent COMMUNITY MANAGEMENT SERVICES, INC 5609 US 19 NEW PORT RICHEY, FL 34652			7. Name and Address of New Registered Agent Name Community Management Services, Inc. Street Address (P.O. Box Number is Not Acceptable) 5837 Trable Creek Rd. City New Port Richey FL Zip Code 34652		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  DATE 4/21/08					
Filing Fee Is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	VPD ☐ Delete				
NAME	VEHAR, KEVIN				
STREET ADDRESS	6143 RIVIERA LN				
CITY-ST-ZIP	NEW PORT RICHEY, FL 34655				
TITLE	SD ☒ Delete				
NAME	VERGADAMO, TERRY				
STREET ADDRESS	8021 RIVIERA LN				
CITY-ST-ZIP	NEW PORT RICHEY, FL 34655				
TITLE	PD ☐ Delete				
NAME	HERSHKOWITZ, JOEL				
STREET ADDRESS	5940 CACHETTE DE RIVIERE CT				
CITY-ST-ZIP	NEW PORT RICHEY, FL 34655				
TITLE	D ☐ Delete				
NAME	SCANNAVINO, DOMINICK				
STREET ADDRESS	6040 RIVIERA LANE				
CITY-ST-ZIP	NEW PORT RICHEY, FL 34655				
TITLE	TD ☐ Delete				
NAME	DAVIS, BILL				
STREET ADDRESS	6004 RIVIERA LANE				
CITY-ST-ZIP	NEW PORT RICHEY, FL 34655				
TITLE	☐ Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	S ☒ Change ☐ Addition				
NAME	Dominick Scannavino				
STREET ADDRESS	6040 Riviera Ln.				
CITY-ST-ZIP	New Port Richey, FL 34655				
TITLE	D ☐ Change ☒ Addition				
NAME	Margaret Rivera				
STREET ADDRESS	5956 Riviera Ln.				
CITY-ST-ZIP	New Port Richey, FL 34655				
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	☐ Change ☐ Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with an other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date 4/21/08 Daytime Phone # 727-816-9900					