

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90074 008 ****61.25

DOCUMENT # N37739 1. Entity Name RIVERVIEW MANOR HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 19254 SARASOTA, FL 34276-2254 US			Mailing Address P.O. BOX 19254 SARASOTA, FL 34276-2254 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
GOLDBLATT, PETER 2504 WATERVIEW CT SARASOTA, FL 34231				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	GOLDBLATT, PETER		NAME		
STREET ADDRESS	2504 WATERVIEW CT.		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34231		CITY-ST-ZIP		
TITLE	TD ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	VALENTICH, MICHELLE		NAME		
STREET ADDRESS	2486 WATERVIEW CT.		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34231		CITY-ST-ZIP		
TITLE	VD ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	BECKER, LARRY-		NAME		
STREET ADDRESS	2497 WATERVIEW CT		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34231		CITY-ST-ZIP		
TITLE	SD ☒ Delete		TITLE	☐ Change ☒ Addition	
NAME	STEIGER, GERALDINE		NAME	SD	
STREET ADDRESS	2534 WATERVIEW CT.		STREET ADDRESS	Silke Busche	
CITY-ST-ZIP	SARASOTA, FL 34231		CITY-ST-ZIP	2558 Waterview Ct.	
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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 all other like empowered.					
SIGNATURE: <u>Michelle C. Valentich</u> Treasurer <u>4-17-08</u> <u>941-922-6383</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					