

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005127

**FILED**  
**Feb 25, 2010**  
**Secretary of State**

**Entity Name:** LE RIVAGE ASSOCIATION, INC.

**Current Principal Place of Business:**

4351 GULF SHORE BLVD. N  
NAPLES, FL 34103 US

**New Principal Place of Business:**

**Current Mailing Address:**

4351 GULF SHORE BLVD. N  
NAPLES, FL 34103 US

**New Mailing Address:**

**FEI Number:** 65-0482036

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHARPEGOR, STEVE  
4351 GULF SHORE BLVD. N.  
NAPLES, FL 34103 US

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

SCHARPEGER, STEVE  
4351 GULF SHORE BLVD. N.  
NAPLES, FL 34103 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: STEVE SCHARPEGER

02/25/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: STEFFEN, CHRISTOPHER  
Address: 4351 GULF SHORE BLVD. N  
City-St-Zip: NAPLES, FL 34103

Title: P  
Name: STEWART, JAY S  
Address: 4351 GULF SHORE BLVD N.  
City-St-Zip: NAPLES, FL 34103

Title: D  
Name: LOWE, BARBARA  
Address: 4351 GULF SHORE BLVD N.  
City-St-Zip: NAPLES, FL 34103

Title: VP  
Name: VIVIANO, JOSEPH  
Address: 4351 GULF SHORE BLVD. N.  
City-St-Zip: NAPLES, FL 34103

Title: S  
Name: KLEBAN, ALBERT  
Address: 4351 GULF SHORE BLVD. N.  
City-St-Zip: NAPLES, FL 34103

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: PATTY L WILLIAMS, ADMIN

ADM

02/25/2010

Electronic Signature of Signing Officer or Director

Date