


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90119 047 ****61.25

DOCUMENT # N99000000286

1. Entity Name
RIVIERA ISLES MASTER ASSOCIATION, INC.



Principal Place of Business
4400 W. SAMPLE RD., STE. 200
COCONUT CREEK, FL 33073-3450

Mailing Address
4400 W. SAMPLE RD., STE. 200
COCONUT CREEK, FL 33073-3450

60012578



2. Principal Place of Business - No P.O. Box #
1495 North Park Dr.

3. Mailing Address
1495 North Park Dr.

Suite, Apt. #, etc.

01032007 Chg-NP CR2E037 (12/06)

City & State
Weston, FL

City & State
Weston FL

Zip
33326

Zip
33326

Country

4. FEI Number
65-0886971

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BAKALAR & EICHNER, P.A.
150 S PINE ISLAND RD STE 540
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

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 _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

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 NAME STREET ADDRESS CITY-ST-ZIP	P BAYLIS, MITCH 4400 W. SAMPLE RD., STE. 200 COCONUT CREEK, FL 330733450 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BUCKENSTEIN, JOEL 4400 W. SAMPLE RD., STE. 200 COCONUT CREEK, FL 330733450 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TELLO, CHRIS 4400 W. SAMPLE RD., STE. 200 COCONUT CREEK, FL 330733450 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEVEHEN, ADRIANA 4955 SW 165 AVE MIRAMAR, FL 33027 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TAYLOR, ROWAN 4953 SW 171 TERR. MIRAMAR, FL 33027 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALBAN, RAY 4400 W SAMPLE RD STE 200 COCONUT CREEK, FL 330733450 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STAN ROSEN 1495 North Park Dr. Weston, FL 33326 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPZ Joel Bruckenstein 1495 North Park Dr. Weston, FL 33326 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Raymond Pilara 1495 North Park Dr Weston, FL 33326 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Adriana De Vetten 1495 North Park Dr. Weston, FL 33326 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Rowan Taylor 1495 North Park Dr. Weston, FL 33326 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ray Galban 1495 North Park Dr. Weston, FL 33326 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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:  **Rowan Taylor** 1-29-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

60012578

Document # N99000000286
Riviera Isles Master Association, Inc.

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Title	D	Addition
Name	Errol Simmons	
Street Address	1495 Northpark Dr	
City - St - Zip	Weston, FL 33326	

Title	D	Addition
Name	Jeff Morris	
Street Address	1495 Northpark Dr	
City - St - Zip	Weston, FL 33326	

Title	D	Addition
Name	Desmond Robinson	
Street Address	1495 Northpark Dr	
City - St - Zip	Weston, FL 33326	