2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2009
Secretary of State

DOCUMENT# N23266

Entity Name: RIVER COVE CONDOMINIUM 1 ASSOCIATION, INC.

Current Principal Place of Business:

RIVER COVE LANDINGS, CONDO I
CRYSTAL RIVER, FL 34423 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1450
CRYSTAL RIVER, FL 34423 US

New Mailing Address:

FEI Number: 59-2954852 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FOSTER, DEBBIE I
11961 W EDGEVIEW COURT
CRYSTAL RIVER, FL 34429 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SMITH, SANDI I
Address: N RIVERSEDGE BLVD
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: SD ( ) Delete
Name: COOPERRIDER, FRAN
Address: 2906 RIVERS EDGE BLVD.
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: VPD ( ) Delete
Name: PAINTER, STEVE
Address: W. EDGEWOOD COURT
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: DT ( ) Delete
Name: FOSTER, DEBBIE
Address: 11961 W EDGEVIEW COURT
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: D ( ) Delete
Name: FOSTER, JAMES C
Address: 11961 W EDGEVIEW COURT
City-St-Zip: CRYSTAL RIVER, FL 34429

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: DEBBIE FOSTER DT 02/20/2009

Electronic Signature of Signing Officer or Director — Date