

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 723206

**FILED  
Mar 12, 2014  
Secretary of State  
CC4284402269**

**Entity Name:** RIVER'S BEND CONDOMINIUM ASSOCIATION, INC

**Current Principal Place of Business:**

1839 MIDDLE RIVER DR  
FORT LAUDERDALE, FL 33305

**Current Mailing Address:**

P.O. BOX 771627  
CORAL SPRINGS, FL 33077 US

**FEI Number:** 59-1560101

**Certificate of Status Desired:** No

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

ROYAL PROPERTY MANAGEMENT, INC.  
8584 SHADOW COURT  
CORAL SPRINGS, FL 33071 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name LOMBARDI, PAUL  
Address 1839 MIDDLE RIVER DR # 302  
City-State-Zip: FORT LAUDERDALE FL 33305

Title T  
Name LYNCH, FRANK  
Address 1839 MIDDLE RIVER DR # 304  
City-State-Zip: FT LAUDERDALE FL 33305

Title D  
Name BROCHU, ARLENE  
Address 1839 MIDDLE RIVER DR # 102  
City-State-Zip: FT LAUDERDALE FL 33305

Title S  
Name RIVERA, AIDA  
Address 1839 MIDDLE RIVER DR # 405  
City-State-Zip: FT LAUDERDALE FL 33305

Title VP  
Name RIEMAN, CHARLES  
Address 1839 MIDDLE RIVER DR #300  
City-State-Zip: FORT LAUDERDALE FL 33305

*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:** PAUL LOMBARDI

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03/12/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date