2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2015
Secretary of State
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Entity Name: RIVERVIEW CONDOMINIUMS ASSOCIATION, INC.

Current Principal Place of Business:

3210 NORTH HARBOR CITY BLVD.
MELBOURNE, FL 32935

Current Mailing Address:

3210 NORTH HARBOR CITY BLVD.
MELBOURNE, FL 32935 US

FEI Number: 59-1915132

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MADY, JAMES
3210 NORTH HARBOR CITY BLVD.
UNIT #307
MELBOURNE, FL 32925 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: JAMES MADY 01/12/2015

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	TREASURER
Name	MADY, JAMES	Name	CAMPANELLI, COLETTE
Address	3210 N. HARBOR CITY BLVD, UNIT #201	Address	3210 N HARBOR CITY BLVD, UNIT #106
City-State-Zip:	MELBOURNE FL 32935	City-State-Zip:	MELBOURNE FL 32935
Title	DIRECTOR	Title	VP
Name	GRAVES, SCOTT	Name	SUTHERLAND, LOIS
Address	3210 N HARBOR CITY BLVD, UNIT #110	Address	3210 N HARBOR CITY BLVD, UNIT #205
City-State-Zip:	MELBOURNE FL 32935	City-State-Zip:	MELBOURNE FL 32935
Title	SECRETARY	Title	DIRECTOR
Name	CAMPANELLI, COLETTE C	Name	PARKS, TINA
Address	3210 NO HARBOR CITY BLVD #106	Address	3210 NO HARBOR CITY BLVD #104
City-State-Zip:	MELBOURNE FL 32935	City-State-Zip:	MELBOURNE FL 32935

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: COLETTE CAMPANELLI SECRETARY 01/12/2015

Electronic Signature of Signing Officer/Director Detail — Date