

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000006802

Entity Name: RIVERBEND MASTER ASSOCIATION, INC**Current Principal Place of Business:**201 S BISCAYNE BLVD
SUITE 1950
MIAMI, FL 33131**Current Mailing Address:**9525 W BRYN MAWR AVENUE
SUITE 700 SUITE 1950
ROSEMONT, IL 60018 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REED, DALE
300 SW 1ST AVENUE, SUITE 106
FORT LAUDERDALE, FL 33301 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:** DALE REED

02/03/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D
Name	MOTWANI, DEV
Address	300 SW 1ST AVENUE, STE 106
City-State-Zip:	FORT LAUDERDALE FL 33301

Title	D
Name	WAXMAN, BRIAN
Address	11780 US HIGHWAY ONE, STE 305
City-State-Zip:	NORTH PALM BEACH FL 33408

Title	D
Name	CARROLL, KEVIN
Address	MIAMI CENTER, 201 SOUTH BAYSHORE BLVD 2601
City-State-Zip:	MIAMI FL 33131

Title	D
Name	POULOS, STEVE
Address	9525 W. BRYN MAWR AVENUE SUITE 700
City-State-Zip:	ROSEMONT IL 60018

Title	D
Name	DEANGULO, JUAN
Address	2875 NE 191ST STE, STE 800
City-State-Zip:	AVENTURA FL 33180

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: STEVE POULOS**MANAGER**

02/03/2021

Electronic Signature of Signing Officer/Director Detail

Date