

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000010951

**Entity Name:** RIVERLAND PARCEL D HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1600 SAWGRASS CORPORATE PARKWAY, SUITE 400  
SUNRISE, FL 33323

**Current Mailing Address:**

1600 SAWGRASS CORPORATE PARKWAY, SUITE400  
SUNRISE, FL 33323 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: Yes**

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

STEVEN M. HELFMAN, ESQ.  
1600 SAWGRASS CORPORATE PARKWAY, SUITE400  
SUNRISE, FL 33323 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 DP  
Name CHARLES SAENZ  
Address 1600 SAWGRASS CORPORATE  
PARKWAY, SUITE 400  
City-State-Zip: SUNRISE FL 33323

Title DVP  
Name MARCIE DEPLAZA  
Address 1600 SAWGRASS CORPORATE  
PARKWAY, SUITE 400  
City-State-Zip: SUNRISE FL 33323

Title DST  
Name N. MARIA MENENDEZ  
Address 1600 SAWGRASS CORPORATE  
PARKWAY, SUITE 400  
City-State-Zip: SUNRISE FL 33323

*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: N. MARIA MENENDEZ**

**TREASURER**

**04/06/2023**

Electronic Signature of Signing Officer/Director Detail

Date