

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000041958

**Entity Name:** RIVER EDGE ASSOCIATES, INC.

**Current Principal Place of Business:**

6300 POWERS FERRY ROAD  
#600-339  
ATLANTA, GA 30339

**Current Mailing Address:**

6300 POWERS FERRY ROAD  
#600-339  
ATLANTA, GA 30339 US

**FEI Number:** 58-2543843

**Certificate of Status Desired:** No

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

BUSINESS FILINGS INCORPORATED  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 D  
Name HAMMER, JACK  
Address 1900 SUNSET HARBOUR DRIVE PH 2  
City-State-Zip: MIAMI BEACH FL 33139

Title PRESIDENT  
Name TRIVERS, DOUGLAS C  
Address 6300 POWERS FERRY ROAD  
#600-339  
City-State-Zip: ATLANTA GA 30339

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DOUGLAS C TRIVERS

**PRESIDENT**

**01/22/2023**

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

\_\_\_\_\_  
Date