2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# 701785

Entity Name: RIVIERA BAY CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

163 87TH AVE. N.
ST. PETERSBURG, FL 33702 US

New Principal Place of Business:

Current Mailing Address:

163 87TH AVE. N.
ST. PETERSBURG, FL 33702 US

New Mailing Address:

FEI Number: 59-2742119 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HOOVER, DONNA
163 87TH AVE NORTH
ST. PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	HOOVER, DAVID	
Address:	163 87TH AVE. N.	
City-St-Zip:	SAINT PETERSBURG, FL 33702	
Title:	S	( ) Delete
Name:	SANDEFER, KIM	
Address:	310 FREEPORT AVENUE	
City-St-Zip:	SAINT PETERSBURG, FL 33702	
Title:	VP	( ) Delete
Name:	O'NEIL, ROY	
Address:	208 SUNLIT COVE DR. N.E.	
City-St-Zip:	SAINT PETERSBURG, FL 33702	
Title:	T	( ) Delete
Name:	HOOVER, DONNA	
Address:	163 87TH AVE. N.	
City-St-Zip:	SAINT PETERSBURG, FL 33702	
Title:	D	( ) Delete
Name:	HEALY, JENNY	
Address:	168 94 AVE NE	
City-St-Zip:	SAINT PETERSBURG, FL 33702	
Title:	D	( ) Delete
Name:	SMITH, ANDREW	
Address:	9645 2ND STREET NORTH	
City-St-Zip:	SAINT PETERSBURG, FL 33702	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	CORSETTE, STEVE	
Address:	101 89TH AVE NE	
City-St-Zip:	SAINT PETERSBURG, FL 33702	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DONNA HOOVER T 04/30/2009

Electronic Signature of Signing Officer or Director — Date