2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709228

FILED Mar 22, 2011 Secretary of State

Entity Name: RIVER GARDEN, INC., A CONDOMINIUM

Current Principal Place of Business: New Principal Place of Business:

RIVER GARDEN INC 3225 E. RIVERSIDE DR FORT MYERS, FL 33916

Current Mailing Address: New Mailing Address:

C/O SILVERCRESTED MANAGEMENT LLC P.O. BOX 1848 FORT MYERS, FL 33902

FEI Number: 59-1310303 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SILVERCRESTED MANAGEMENT LLC 3436 MARINATOWN LANE 1ST FL UNIT 4 NORTH FORT MYERS, FL 33903 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

OFFICERS AND DIRECTORS:

NESTER, SUZANNE Name: Address: PO BOX 2846 City-St-Zip: FORT MYERS, FL 33902

Title:

Name: HOOD, JOHN Address: P.O. BOX 1022

City-St-Zip: BELLE GLADE, FL 33430

Title: STD BELL, PATTI Name:

3225 EAST RIVERSIDE DR 43D Address: City-St-Zip: FORT MYERS, FL 33916

Title: PD

Name: ARTRIP, LANCE

3225 E. RIVERSIDE DRIVE #57E Address: City-St-Zip:

FORT MYERS, FL 33916

Title:

FRANCIS, REBECCA Name: 3225 E RIVERSIDE DR. # 24B Address: City-St-Zip: FORT MYERS, FL 33916

Title:

THOMPSON, RICHARD Name: Address: PO BOX 2846 FORT MYERS, FL 33902 City-St-Zip:

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: LANCE ARTRIP PD 03/22/2011