

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726490

FILED
Apr 26, 2008
Secretary of State

Entity Name: RIVERWALK COVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5820 HARBOUR CLUB RD
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

5820 HARBOUR CLUB RD
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 59-1654142 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALVARENGA, ARAI
5816 WHITING CT #224
FORT MYERS, FL 33919 US

Name and Address of New Registered Agent:

PELUSO, MARIENE
5816 WHITING CT #224
FORT MYERS, FL 33919 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: MARIENE PELUSO

04/26/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ALVERANGA, ARIA
Address: 5816 WHITING CT #224
City-St-Zip: FORT MYERS, FL 33919

Title: VP () Delete
Name: SUCHAN, MILANDA
Address: 4794 ALBARCORE LANE#216
City-St-Zip: FORT MYERS, FL 33919

Title: T () Delete
Name: BAQUERO, WELLINGTON
Address: 5837 WHITING CT #255
City-St-Zip: FORT MYERS, FL 33919

Title: S () Delete
Name: CAROTENUTO, DONNA
Address: 4813 SUNFISH CT #264
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: SALLOUM, TOM
Address: 5846 HARBOUR CLUB RD #207
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PELUSO, MARIENE
Address: 5816 WHITING CT #224
City-St-Zip: FORT MYERS, FL 33919

Title: VP (X) Change () Addition
Name: HEMSTEAD, RAYMOND
Address: 5839 WHITING CT #254
City-St-Zip: FORT MYERS, FL 33919

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DEMELLO, JERALDA
Address: 4812 BLUE FISH CT #248
City-St-Zip: FORT MYERS, FL 33919

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: MARIENE PELUSO

P

04/26/2008

Electronic Signature of Signing Officer or Director

Date