2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#726933

FILED Apr 29, 2008 Secretary of State

Entity Name: RIVERBEND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 9300 SE RIVERFRONT TERRACE TEQUESTA, FL 33469 **Current Mailing Address: New Mailing Address:** 9300 SE RIVERFRONT TERRACE TEQUESTA, FL 33469 FEI Number: 59-1567540 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: CORNETT, J L 401 E OSCEOLA ST 1ST FL STUART, FL 34994 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition YASENSKY, THOMAS Name: Name: FORSGATE M-9169 SE RIVERFRONT TERRACE Address: Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: Title: Title: () Delete () Change () Addition WATERMAN, JANET Name: Name: Address: CONCORD K-18430 SE WOOD HAVEN LANE Address: City-St-Zip: TEQUESTA, FL 33456 City-St-Zip: Title: () Delete Title: (X) Change () Addition SCHMIDT, JOHN Name: SCHMIDT, JOHN Name: COLONIAL J- 18459 SE WOOD HAVEN LANE COLONIAL J-18459 SE WOOD HAVEN LANE Address: Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: TEQUESTA, FL 33469 Title: SD () Delete Title: () Change () Addition Name: DEEHAN, MARY LOU Name: COLONIAL B-18449 SE WOOD HAVEN LN Address: Address: TEQUESTA, FL 33469 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition WILLRICK, WALLY CLARK, ROBERT Name: Name: SHAWNEE A-18510 SE WOOD HAVEN LANE OAKMONT A-9179 SE RIVERFRONT TER Address: Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: TEQUESTA, FL 33469 Title: () Delete Title: () Change () Addition PINTER, JOHN Name: Name: Address: FENWAY E-9219 SE RIVERFRONT TER Address: TEQUESTA, FL 33469 City-St-Zip: 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: JANET WATERMAN TD 04/29/2008