

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734478

FILED
Jan 27, 2009
Secretary of State

Entity Name: RIVER ISLES GOLF ASSOCIATION, INCORPORATED

Current Principal Place of Business:

1014 BAY TREE RD
BRADENTON, FL 34208 US

New Principal Place of Business:

Current Mailing Address:

159 RIVER ISLES
BRADENTON, FL 34208

New Mailing Address:

FEI Number: 59-1665094 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSS, KATHLEEN M
1313 BOTTLEBRUSH DRIVE
BRADENTON, FL 34208 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: T () Delete
Name: BROOKS, MARY ANN
Address: 4309 LEMONWOOD CIR
City-St-Zip: BRADENTON, FL 34208

Title: S () Delete
Name: ALWARDT, VIRGINIA
Address: 4301 LEMONWOOD CIRCLE
City-St-Zip: BRADENTON, FL 34208

Title: P () Delete
Name: MOSS, KATHLEEN M
Address: 1313 BOTTLEBRUSH DRIVE
City-St-Zip: BRADENTON, FL 34208

Title: D () Delete
Name: WOOD, FRANK J
Address: 4007 PALM COURT
City-St-Zip: BRADENTON, FL 34208

Title: D () Delete
Name: JENSEN, LAWRENCE
Address: 1315 BOTTLEBRUSH DRIVE
City-St-Zip: BRADENTON, FL 34208

Title: VP () Delete
Name: RICHTER, EDWIN
Address: 4509 LAKEWOOD AVE
City-St-Zip: BRADENTON, FL 34208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: MCCABE, DAVID
Address: 4774 MAINSAIL DRIVE
City-St-Zip: BRADENTON, FL 34208

Title: S (X) Change () Addition
Name: CATALANO, LAURA
Address: 1515 KNOLLWOOD DRIVE S.
City-St-Zip: BRADENTON, FL 34208

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

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

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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: KATHLEEN M. MOSS

P

01/27/2009

Electronic Signature of Signing Officer or Director

Date