

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739361

FILED
Mar 20, 2007
Secretary of State

Entity Name: 115 RIVER DRIVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-2132051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 327795044 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: VD (X) Delete
Name: THORNEWELL, MARYILYN
Address: 115 INDIAN RIVER DR., #417
City-St-Zip: COCOA, FL 32922

Title: TD () Delete
Name: OSBOURN, MARY L
Address: 115 INDIAN RIVER DR #424
City-St-Zip: COCOA, FL 32922

Title: SD () Delete
Name: SMITH, JOSEPH
Address: 115 INDIAN RIVER DRIVE # 203
City-St-Zip: COCOA, FL 32922

Title: D () Delete
Name: HOGG, BRUCE
Address: 115 INDIAN RIVER DR., #220
City-St-Zip: COCOA, FL 32922

Title: PD () Delete
Name: HYATT, ROY
Address: 115 INDIAN RIVER DRIVE # 230
City-St-Zip: COCOA, FL 32922

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: EAGEN, PAULINE
Address: 115 INDIAN RIVER DR #133
City-St-Zip: COCOA, FL 32922

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

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

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

Title: VPD () Change (X) Addition
Name: ROBERTS, HARRY
Address: 115 INDIAN RIVER DR N #426
City-St-Zip: COCOA, FL 32922

I hereby certify that the information supplied with this filing does not qualify for the 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: ROY HYATT

PD

03/20/2007

Electronic Signature of Signing Officer or Director

Date