

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742390

FILED
Apr 29, 2010
Secretary of State

Entity Name: RIVIERA GOLF ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

RIVIERA GOLF ESTATES
425 CHARLEMAGNE BLVD.
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

3701 NORTH TAMIAMI TRAIL
NAPLES, FL 34103

New Mailing Address:

FEI Number: 59-2678506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAMOUCÉ, ROBERT
5405 PARK CENTRAL CT
NAPLES, FL 34109 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: P
Name: BULAT, LEONARD
Address: 117 BORDEAUX CIRCLE
City-St-Zip: NAPLES, FL 34112

Title: 2VD
Name: FURGASSO, JOSEPH
Address: 112 BELLE ISLE CIRCLE
City-St-Zip: NAPLES, FL 34112

Title: D
Name: CANNON, WILLIAM
Address: 169 FLEUR DE LIS LN
City-St-Zip: NAPLES, FL 34112

Title: 1VP
Name: KEAN, BRUCE
Address: 104 BRITTANY COURT
City-St-Zip: NAPLES, FL 34112

Title: D
Name: MULLIGAN, PHILIP
Address: 94 LEMANS DRIVE
City-St-Zip: NAPLES, FL 34112

Title: D
Name: LANGFORD, PAUL
Address: 894 CHARLEMAGNE BLVD
City-St-Zip: NAPLES, FL 34112

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: COMPASS GROUP

MGR

04/29/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date