## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#750680** 

Feb 18, 2010 Secretary of State

Entity Name: RIVER WILDERNESS OF EVERGLADES CITY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

210 COLLIER AVE

EVERGLADES, FL 341390380 US

**Current Mailing Address: New Mailing Address:** 

210 COLLIER AVE P O BOX 380

EVERGLADES, FL 341390380 US

FEI Number: 65-0085155 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:

RICHMAN KENNETH W JA ESQ 8955 FONTANA DEL SOL WAY SUITE 301 NAPLES, FL 34108 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:**

OWENS, JOHN B Name: Address: 7601 SW 134TH AVENUE City-St-Zip: MIAMI, FL 33183

Title: DS

Name: BAIER, RICHARD D

Address: P.O. BOX 8 - 402 N. 1ST STREET

City-St-Zip: CISSNA PARK, IL 60924

Title:

NAP, MARK Name: Address: 9351 W. H AVE City-St-Zip: KALAMAZOO, MI 49009

Title:

Name: STIEFVATOR, JOHN Address: 225 CLINTON RD

City-St-Zip: NEW HARTFORD, NY 13413

Title: DVT

Name: BAIER, MYRNA

Address: P.O. BOX 8 - 402 N. 1ST STREET City-St-Zip: CISSNA PARK, IL 609240008

Title:

MARTINEZ, SUSANA Name: Address: 1070 23RD ST SW NAPLES, FL 34117 City-St-Zip:

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.

**T/VP** SIGNATURE: MYRNA L. BAIER 02/18/2010