2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2012
Secretary of State

DOCUMENT# 750680

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

Current Principal Place of Business:

210 COLLIER AVE
EVERGLADES, FL 341390380 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 380
EVERGLADES, FL 341390380 US

New Mailing Address:

FEI Number: 65-0085155 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RICHMAN KENNETH W JA ESQ
8955 FONTANA DEL SOL WAY
SUITE 301
NAPLES, FL 34108 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: DV
Name: OWENS, JOHN B
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: D
Name: NAP, MARK
Address: 9351 W. H AVE
City-St-Zip: KALAMAZOO, MI 49009

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

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: MYRNA L. BAIER DVT 03/14/2012

Electronic Signature of Signing Officer or Director — Date