

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756971

FILED  
Mar 18, 2011  
Secretary of State

**Entity Name:** RIVER SHORES PLANTATION PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

3 M'S PROPERTY MANAGEMENT  
1501 S.E. DECKER AVE. SUITE A101  
STUART, FL 34994 US

**New Principal Place of Business:**

2143 N.W. 19TH DRIVE  
STUART, FL 34994 US

**Current Mailing Address:**

3 M'S PROPERTY MANAGEMENT  
1501 S.E. DECKER AVE. SUITE A101  
STUART, FL 34994 US

**New Mailing Address:**

1501 S.E. DECKER AVE.  
A 101  
STUART, FL 34994

**FEI Number:** 59-2188993

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

3 M'S PROPERTY MANAGEMENT  
1501 SE DECKER AVE  
SUITE A101  
STUART, FL 34994 US

**Name and Address of New Registered Agent:**

5 M'S PROPERTY MANAGEMENT  
1501 SE DECKER AVE  
SUITE A101  
STUART, FL 34994 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: MICHAEL A. MAZZIOTTA

03/18/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: QUINN, ROBERT J  
Address: 1501 SE DECKER AVE, SUITE A101  
City-St-Zip: STUART, FL 34994

Title: D  
Name: DIMBAT, JOHN F  
Address: 1501 SE DECKER AVE. SUITE A 101  
City-St-Zip: STUART, FL 34994

Title: D  
Name: LAINO, JOESPH  
Address: 1501 S.E. DECKER AVE, SUITE A 101  
City-St-Zip: STUART, FL 34994

Title: SD  
Name: RHETT, IRIS  
Address: 1501 S.E. DECKER AVE SUITE A101  
City-St-Zip: STUART, FL 34994

Title: T-VP  
Name: RIVAS, VICTOR  
Address: 1501 S.E. DECKER AVE. SUITE A101  
City-St-Zip: STUART, FL 34994

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: ROBERT J. QUINN

PD

03/18/2011

Electronic Signature of Signing Officer or Director

Date