2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# 758487

Entity Name: RIVERPLACE II ASSOCIATION, INC.

Current Principal Place of Business:

1800 OLD RIVER ROAD
FORT PIERCE, FL 34982 US

New Principal Place of Business:

Current Mailing Address:

1800 OLD RIVER ROAD
FORT PIERCE, FL 34982 US

New Mailing Address:

FEI Number: 65-0099873 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILSON, DAURA H T,D
1800 OLD RIVER ROAD
FORT PIERCE, FL 34982 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,D ( ) Delete
Name: DELUTIS, FRED P,D
Address: 1904 OLD RIVER ROAD
City-St-Zip: FORT PIERCE, FL 34982

Title: VP,D ( ) Delete
Name: MAYO, JOHN VP,D
Address: 1207 SW 87TH TERRACE
City-St-Zip: PLANTATION, FL 33324

Title: S,D ( ) Delete
Name: MULLINS, ROBERT S,D
Address: 1910 OLD RIVER ROAD
City-St-Zip: FORT PIERCE, FL 34982

Title: T,D ( ) Delete
Name: HILSON, DAURA H T,D
Address: 1800 OLD RIVER ROAD
City-St-Zip: FORT PIERCE, FL 34982

Title: D ( ) Delete
Name: BISHOP, RAYMOND D
Address: 4844 RIVER PLACE
City-St-Zip: FORT PIERCE, FL 43982

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: DAURA H. HILSON T,D 03/20/2009
Electronic Signature of Signing Officer or Director — Date