2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2011
Secretary of State

DOCUMENT# L05000097643

Entity Name: RIVERSIDE CENTER, LLC

Current Principal Place of Business:

804 CAPE VIEW DR
FT MYERS, FL 33919

New Principal Place of Business:

9990 CYPRESS LAKE DR
FT MYERS, FL 33919

Current Mailing Address:

804 CAPE VIEW DR
FT MYERS, FL 33919

New Mailing Address:

9990 CYPRESS LAKE DR
FT MYERS, FL 33919

FEI Number: 84-1691514 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHAMBRE, DENISE
804 CAPE VIEW DR
FT MYERS, FL 33919 US

Name and Address of New Registered Agent:

CHAMBRE, DENISE
9990 CYPRESS LAKE DR
FT MYERS, FL 33919 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: DENISE CHAMBRE 03/31/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: CHAMBRE, DENISE
Address: 9990 CYPRESS LAKE DR
City-St-Zip: FT. MYERS, FL 33919

Title: MGRM
Name: ROWE, RICHARD
Address: 990 CYPRESS LAKE DRIVE
City-St-Zip: FT. MYERS, FL 33919

Title: MGRM
Name: COLLINS, MICHAEL DR.
Address: 7244 HEAVEN LANE
City-St-Zip: FT. MYERS, FL 33908

Title: MGRM
Name: COLLINS, KRISTEN
Address: 7244 HEAVEN LANE
City-St-Zip: FT. MYERS, FL 33908

Title: MGRM
Name: LAQUIS, STEPHEN DR.
Address: 19846 MARKWARD CROSSING
City-St-Zip: ESTERO, FL 33928

Title: MGRM
Name: LAQUIS, NICOLE
Address: 19846 MARKWARD CROSSING
City-St-Zip: ESTERO, FL 33928

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: DENISE CHAMBRE MGR 03/31/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date