2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2009
Secretary of State

DOCUMENT# N01000003403

Entity Name: RIVIERA VILLAGE ASSOCIATION, INC.

Current Principal Place of Business:

1688 ESPANOLA AVENUE
HOLLY HILL, FL 32117 US

New Principal Place of Business:

Current Mailing Address:

1688 ESPANOLA AVENUE
HOLLY HILL, FL 32117 US

New Mailing Address:

FEI Number: 20-8442322 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRUHLER, LINDA
1688 ESPANOLA AVENUE
HOLLY HILL, FL 32117 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 ( ) Delete
Name: GRUHLER, LINDA
Address: 1688 ESPANOLA AVENUE
City-St-Zip: HOLLY HILL, FL 32117 US

Title: VP ( ) Delete
Name: URRUTIA, HUMBERTO
Address: 1704 ESPANOLA AVENUE
City-St-Zip: HOLLY HILL, FL 32117 US

Title: S ( ) Delete
Name: OLSEN, MARYANNE C
Address: 1708 ESPANOLA AVENUE
City-St-Zip: HOLLY HILL, FL 32117 US

Title: T ( ) Delete
Name: REID, ELIZABETH
Address: 192 BEAR FOOT TRAIL
City-St-Zip: ORMOND BEACH, FL 32174 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: DEVIES, A J
Address: 1684 ESPANOLA AVE
City-St-Zip: HOLLY HILL, FL 32117 US

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: ELIZABETH A REID T 04/18/2009

Electronic Signature of Signing Officer or Director — Date