2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 31, 2005
Secretary of State

DOCUMENT# N01000006976

Entity Name: RIVIERA NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

3835 UTOPIA COURT
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

P.O BOX 430825
SOUTH MIAMI, FL 332430825

New Mailing Address:

FEI Number: 65-1148228 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GIBBS, W. TUCKER
3835 UTOPIA COURT
COCONUT GROVE, FL 33133 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: D ( ) Delete
Name: MORTENSON, BLANCHE
Address: 1325 SAN IGNACIO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: SD ( ) Delete
Name: WRIGHT, ANNETTE
Address: 6710 SANTONA STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: PD ( ) Delete
Name: NEWMAN, JOYCE
Address: 1212 SANTONA STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: DT ( ) Delete
Name: CHETWOOD, SUSAN E
Address: 6612 TARREGA STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: VPD ( ) Delete
Name: MITCHELL, LYNN
Address: 6700 SANTONA STREET
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete
Name: ACOSTA, AMADO
Address: 1225 SOUTH ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33146

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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SUSAN E. CHETWOOD DT 05/31/2005

Electronic Signature of Signing Officer or Director — Date