2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2009
Secretary of State

DOCUMENT# N02000003042

Entity Name: RIVERSTONE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11784 W. SAMPLE RD.
103
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

Current Mailing Address:

11784 W. SAMPLE RD.
103
CORAL SPRINGS, FL 33065 US

New Mailing Address:

FEI Number: 04-3658941 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED COMMUNITY MGT. CORP.
11784 W. SAMPLE RD.
103
CORAL SPRINGS, FL 33065 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: PD ( ) Delete
Name: WAGANHEIM, ART
Address: 14922 S.W. 33 STREET
City-St-Zip: DAVIE, FL 33331

Title: VP ( ) Delete
Name: CCHI-VILLEGAS, LAUREN PETTINI
Address: 14958 S.W. 40 STREET
City-St-Zip: DAVIE, FL 33331

Title: TD ( ) Delete
Name: JANI, KAMAL
Address: 15000 S.W. 35 ST. 107
City-St-Zip: DAVIE, FL 33331

Title: SD ( ) Delete
Name: COLLINS, GINGER
Address: 14942 S.W. 36 STREET
City-St-Zip: DAVIE, FL 33331

Title: D ( ) Delete
Name: OLINICK, ADAM
Address: 943 S.W. 87 AVE.
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WAGANHEIM, ARTHUR
Address: 14922 S.W. 33 STREET
City-St-Zip: DAVIE, FL 33331

Title: VP (X) Change ( ) Addition
Name: VILLEGAS, LAUREN
Address: 14958 S.W. 40 STREET
City-St-Zip: DAVIE, FL 33331

Title: D (X) Change ( ) Addition
Name: OLINICK, ADAM
Address: 943 SW 87 AVE
City-St-Zip: DAVIE, FL 33331

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

Title: D (X) Change ( ) Addition
Name: HAMILTON, DAMIAN
Address: 14823
City-St-Zip: MIAMI, FL 33331

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: MARY LOU PALMER AGT 03/14/2009

Electronic Signature of Signing Officer or Director — Date