## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000004956

Entity Name: RIVIERA BELLA MASTER ASSOCIATION, INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
107 PHILIPF DEBARY, F				6972 LAKE GLORIA BLVE ORLANDO, FL 32809		
Current Mailing Address:				New Mailing Address:		
5955 T.G. L SUITE 300 ORLANDO,				6972 LAKE GLORIA BLVE ORLANDO, FL 32809		
FEI Number:	56-2399512	FEI Number Applied For ( )	FEI Nun	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
5955 T.G. L SUITE 300	ANAGEMENT EE BLVD. FL 32822 U			LELAND MANAGEMENT 6972 LAKE GLORIA BLVE ORLANDO, FL 32809	) US	
The above r		submits this statement for the p	urpose o	f changing its registered of	fice or registered agent, or both,	
SIGNATURE:				04/27/2009		
Electronic Signature of Registered Agent				Date		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name:	PD () HENIN, JEROM PO BOX 680	Delete E		Title: ( ) Name:	Change ( ) Addition	

City-St-Zip: City-St-Zip: WINTER PARK, FL 32790

Title: VD ( ) Delete Title: (X) Change ( ) Addition VANAUKER, ROGER VANAUKER, ROGER Name: Name:

Address:

PO BOX 680 Address: PO BOX 680

WINTER PARK, FL 32790 WINTER PARK, FL 32790 City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition JEFFRIES, DIÉM JEFFRIES, DIEM Name: Name:

PO BOX 680 Address: PO BOX 680 Address:

WINTER PARK, FL 32790 WINTER PARK, FL 32790 City-St-Zip: 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: JEROME HENIN PD 04/27/2009