

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005113

FILED
May 30, 2008
Secretary of State

Entity Name: RIVIERA KEY HOMEOWNERS ASSOCIATION, INC

Current Principal Place of Business:

2180 WEST STATE RD.434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

19 E. CENTRAL BLVD
SECOND FLOOR
ORLANDO, FL 32801

Current Mailing Address:

2180 WEST STATE RD.434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

19 E. CENTRAL BLVD
SECOND FLOOR
ORLANDO, FL 32801

FEI Number: 20-1025974 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:

Name and Address of New Registered Agent:

COMMUNITY RESOURCE MANAGEMENT, INC.
19 E. CENTRAL BLVD.
SECOND FLOOR
ORLANDO, FL 32801 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: FRANK SURFACE

05/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARTIN, ERNIE
Address: 825 TAVERNIER CIR NE
City-St-Zip: PALM BAY, FL 32905

Title: VPD () Delete
Name: KREITZER, DEANNA M
Address: 829 TAVERNIER CIR NE
City-St-Zip: PALM BAY, FL 32905

Title: STD () Delete
Name: BECKHAM, NINALEE
Address: 944 TAVERNIER CIR NE
City-St-Zip: PALM BAY, FL 32905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BORDE, KEITH
Address: 19 E. CENTRAL BLVD
City-St-Zip: ORLANDO, FL 32801

Title: VPD (X) Change () Addition
Name: CHADMAN, GEORGE
Address: 19 E. CENTRAL BLVD
City-St-Zip: ORLANDO, FL 32801

Title: ST (X) Change () Addition
Name: FOIX, MARSHA
Address: 19 E. CENTRAL BLVD
City-St-Zip: ORLANDO, FL 32801

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: KEITH BORDE

PD

05/30/2008

Electronic Signature of Signing Officer or Director

Date