

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007377

FILED
Mar 04, 2009
Secretary of State

Entity Name: RIVIERA ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O FPCPM
17 OLD KINGS ROAD NORTH, SUITE B
PALM COAST, FL 32137

New Principal Place of Business:

RIVIERA ESTATES COURT
PALM COAST, FL 32164 US

Current Mailing Address:

P.O.BOX 350517
PALM COAST, FL 32135

New Mailing Address:

P.O.BOX 350517
PALM COAST, FL 32135 US

FEI Number: 20-3512527

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLAGLER PALM COAST PROPERTY MANAGEMENT, INC
17 OLD KINGS ROAD NORTH
SUITE B
SAINT AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

FLAGLER PALM COAST PROPERTY MANAGEMENT, INC
50 LEANNI WAY
SUITE B6
PALM COAST, FL 32137 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: MARC BELLAPIANTA

03/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BALKUNAS, AUDREY
Address: 9 RIVIERA ESTATES CT
City-St-Zip: PALM COAST, FL 32137

Title: UPTD () Delete
Name: ROUSHEY, PATRICIA
Address: 13 RIVIERA ESTATES COURT
City-St-Zip: PALM COAST, FL 32164

Title: SD () Delete
Name: FITZGERALD, ROBERT
Address: 06 RIVIERA ESTATES COURT
City-St-Zip: PALM COAST, FL 32164

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BALKUNAS, AUDREY
Address: 9 RIVIERA ESTATES CT
City-St-Zip: PALM COAST, FL 32164 US

Title: VPTD (X) Change () Addition
Name: ROUSHEY, PATRICIA
Address: 13 RIVIERA ESTATES COURT
City-St-Zip: PALM COAST, FL 32164 US

Title: SD (X) Change () Addition
Name: FITZGERALD, ROBERT
Address: 06 RIVIERA ESTATES COURT
City-St-Zip: PALM COAST, FL 32164 US

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: AUDREY BALKUNAS

PRES

03/04/2009

Electronic Signature of Signing Officer or Director

Date