


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007 8:00 am
Secretary of State

04-11-2007 90024 012 ****61.25

DOCUMENT # N04000008415	
1. Entity Name RIVERSIDE VILLAS, INC.	

Principal Place of Business 712 SW 14TH AVE FORT LAUDERDALE, FL 33312	Mailing Address 712 SW 14TH AVE FORT LAUDERDALE, FL 33312
---	---

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number
20-1693049

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

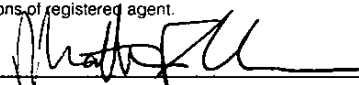
03122007 Chg-NP CR2E037 (12/06)

Applied For
Not Applicable

6. Name and Address of Current Registered Agent	
ALLEN, MATHEW F 712 SW 14TH AVE STE 4 FORT LAUDERDALE, FL 33312	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

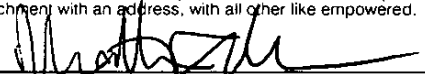
SIGNATURE  DATE **4/6/07**

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
---	---	--	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANEY, BRIAN	NAME	VP Allen, Matthew
STREET ADDRESS	716 SW 14TH AVE #3	STREET ADDRESS	712 SW 14TH AVE #3
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312	CITY-ST-ZIP	Fort Lauderdale, FL 33312
TITLE	VP <input checked="" type="checkbox"/> Delete	TITLE	S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARTNER, TARA	NAME	Gartner, Tara
STREET ADDRESS	716 SW 14TH AVE #3	STREET ADDRESS	716 SW 14TH AVE #3
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312	CITY-ST-ZIP	Fort Lauderdale, FL 33312
TITLE	S <input checked="" type="checkbox"/> Delete	TITLE	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLANK, THERESA	NAME	Walker, Lindsay
STREET ADDRESS	716 SW 14TH AVE #2	STREET ADDRESS	712 SW 14TH AVE #3
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312	CITY-ST-ZIP	Fort Lauderdale, FL 33312
TITLE	T <input checked="" type="checkbox"/> Delete	TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALLEN, MATHEW	NAME	Blank, Theresa
STREET ADDRESS	712 SW 14TH AVE #4	STREET ADDRESS	716 SW 14TH AVE #2
CITY-ST-ZIP	FORT LAUDERDALE, FL 33312	CITY-ST-ZIP	Fort Lauderdale, FL 33312
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE **4/6/07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #