

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 03, 2009
Secretary of State

DOCUMENT# N04000011768

Entity Name: TERRACES AT RIVERWALK MASTER ASSOCIATION, INC.**Current Principal Place of Business:**12734 KENWOOD LANE, SUITE 49
FT MYERS, FL 33907**New Principal Place of Business:**8359 BEACON BLVD.
SUITE 313
FT MYERS, FL 33907**Current Mailing Address:**12734 KENWOOD LANE, SUITE 49
FT MYERS, FL 33907**New Mailing Address:**8359 BEACON BLVD.
SUITE 313
FT MYERS, FL 33907**FEI Number:** 59-3793893**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TROPICAL ISLES MGMT SERVICE
12734 KENWOOD LANE, SUITE 49
FT MYERS, FL 33907 US**Name and Address of New Registered Agent:**HAYDEN & ASSOCIATES
8359 BEACON BLVD.
SUITE 313
FT MYERS, FL 33907 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: KENNETH W. HAYDEN

09/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MANNING, DAVID
Address: 8341 WHISKEY PRESERVE CIRCLE #524
City-St-Zip: FORT MYERS, FL 33919

Title: P () Delete
Name: LAMEY, SHAWN
Address: 8341 WHISKEY PRESERVE CIR #546
City-St-Zip: FORT MYERS, FL 33919

Title: ST () Delete
Name: COLLIER, TIM
Address: 5631 SOLERA COURT
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: FRENCH, STAN
Address: 8251 PATHFINDER LOOP #634
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: SANDT, JASON
Address: 8251 PATHFINDER LOOP #635
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: PROVENCE, TAMMY
Address: 8320 WHISKEY PRESERVE CIRCLE #315
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAMEY, SHAWN
Address: 8341 WHISKEY PRESERVE CIRCLE #546
City-St-Zip: FORT MYERS, FL 33919

Title: VP (X) Change () Addition
Name: MANNING, DAVID
Address: 8341 WHISKEY PRESERVE CIR #524
City-St-Zip: FORT MYERS, FL 33919

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

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

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

Title: () Change () Addition
Name:
Address:
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: KENNETH W. HAYDEN

AGEN

09/03/2009

Electronic Signature of Signing Officer or Director

Date