2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000000158

FILED Jul 13, <u>2</u>009 Secretary of State

Entity Name: LAGUNA RIVIERA MASTER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

4200 WEST CYPRESS STREET

SUITE 444 TAMPA, FL 33607

9031 TOWN CENTER PKWY BRADENTON, FL 34202

Current Mailing Address: New Mailing Address:

10350 BREN ROAD WEST 9031 TOWN CENTER PKWY MINNETOAKA, MN 55343 BRADENTON, FL 34202

FEI Number: 34-2034461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET

TALLAHASSEE, FL 32301 US ADVANCED MANAGEMENT, INC. 9031 TOWN CENTER PKWY BRADENTON, FL 34202

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: DOUGLAS E WILSON 07/13/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition SANCHEZ, JULIE GASSIE, JOHN R Name: Name:

4200 WEST CYPRESS ST., STE. 444 Address: 20 NORTH ORANGE AVE., STE 1108 Address:

City-St-Zip: TAMPA, FL 33607 City-St-Zip: ORLANDO, FL 32801

(X) Change () Addition Title: VD () Delete Title:

FOSTER, JOSEPH Name: FOSTER, JOSEPH Name: Address: 606 RIVIERA YUNIS WAY #406 Address: 606 RIVIERA DUNES WAY #406

City-St-Zip: PALMETTO, FL 34221 City-St-Zip: PALMETTO, FL 34221

Title: STD () Delete Title: STD (X) Change () Addition HAMVAY, JENNIFER Name: BROWN, TIMOTHY M Name:

4200 WEST CYPRESS ST., STE. 444 600 GALLERIA PKWY, STE 890 Address: Address:

City-St-Zip: TAMPA, FL 33607 City-St-Zip: ATLANTA, GA 30339

Title: () Delete Title: AS () Change (X) Addition

Name: Name: WILSON, DOUGLAS E 9031 TOWN CENTER PKWY Address: Address: City-St-Zip: City-St-Zip: BRADENTON, FL 34202

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: DOUGLAS E. WILSON AS 07/13/2009