2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

5/8/2006-90291-046-$61.25-$61.25

FILED
Aug 03, 2006 8:00 A.M.
Secretary of State

DOCUMENT # N05000003911

1. Entity Name
RIVERSIDE TOWNHOMES OF TAMARAC HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7975 N.W. 154TH STREET SUITE 400 MIAMI LAKES, FL 33016	7975 N.W. 154TH STREET SUITE 400 MIAMI LAKES, FL 33016

04202006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
C/O SUNCAE MANAGEMENT SERVICES	7071 W. COMMERCIAL BLVD
Suite, Apt. #, etc.	Suite, Apt. #, etc. SUITE 2-B
City & State	City & State TAMARAC, FLORIDA
Zip / Country	Zip 33319 / Country USA

4. FEI Number 20-2731616 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KIMBALL FLETCHER, PATRICIA 200 SOUTH BISCAYNE BLVD. SUITE 3400 MIAMI, FL 33131	Name C/O SUNCAE MANAGEMENT SERVICES Street Address (P.O. Box Number is Not Acceptable) 7071 W. COMMERCIAL BLVD. SUITE 2-B City TAMARAC FL Zip Code 33319

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 Karen Busch 4/20/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ $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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BRIELE, ROBERT 7975 N.W. 154TH STREET MIAMI LAKES, FL 33016	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Fabricio, Sonia 5931 RIVERSIDE AVE Tamarac, FL 33321	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CARDOSO, NICOLE 7975 N.W. 154TH STREET MIAMI LAKES, FL 33016	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD Guglietta, JORGE 5923 RIVERSIDE AVE Tamarac, FL 33321	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD LAM, YOLANDA 7975 N.W. 154TH STREET MIAMI LAKES, FL 33016	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Bedoya, Harold 5911 RIVERSIDE AVE Tamarac, FL 33321	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JC 8/3	☐ Change ☐ Addition

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: JORGE GUGLIETTA (954)733-9010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #