2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000012909

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Entity Name: RIVIERA PALMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 11784 W SAMPLE RD #103 CORAL SPRINGS, FL 330654447 US **New Mailing Address: Current Mailing Address:** 11784 W SAMPLE RD #103 CORAL SPRINGS, FL 330654447 US FEI Number: 86-1159581 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: MIRZA BASULTO & ROBBINS, LLP 14160 PALMETTO FRONTAGE ROAD SUITE 22 MIAMI LAKES, FL 330161506 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete () Change () Addition NAFTALY, DAVID Name: Name: 11707 NW 69 PLACE Address: Address: City-St-Zip: PARKLAND, FL 33076 City-St-Zip: Title: PD () Delete Title: () Change () Addition USOW, ERON Name: Name: Address: 3870 LYONS ROAD, UNIT 306 Address: City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: Title: () Delete Title: (X) Change () Addition SODERLUND, CYNTHIA MEHALIS, SPERO D Name: Name: 3870 LYONS ROAD, UNIT 203 9661 NW 11 STREET Address: Address: City-St-Zip: COCONUT CREEK, FL 33073 City-St-Zip: PLANTATION, FL 33322 (X) Change () Addition Title: TD () Delete Title: SD Name: WADE, AARON Name: GUZMAN, LEDY 3880 LYONS ROAD, UNIT 309 3844 LYONS ROAD, UNIT 303 Address: Address: City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: COCONUT CREEK, FL 33073 US Title: () Delete Title: (X) Change () Addition BARBER, DENNIS EVAN, CLAUDIA Name: Name: 3848 LYONS ROAD, UNIT 202 9505 LAKE SERENA DRIVE Address: Address: City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: BOCA RATON, FL 33496 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: DAVID NAFTALY VPD 11/23/2009