

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05181

FILED
Apr 21, 2009
Secretary of State

Entity Name: RIVERVIEW SOUTH OF DEERFIELD BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

261 N.E. 19TH AVE.
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

261 N.E. 19TH AVE.
DEERFIELD BEACH, FL 33441

New Mailing Address:

FEI Number: 59-2634708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAVALLINO, FRANKE
261 NE 19TH AVE. #7
DEERFIELD BEACH, FL 33441 US

Name and Address of New Registered Agent:

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:

Title: PSTD () Delete
Name: DURANTE, ED
Address: 261 NE 19TH AVE APT 14
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: V () Delete
Name: CAVALLINO, FRANKE
Address: 261 NW 19TH AVE APT 7
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D () Delete
Name: DURANTE, JOAN
Address: 261 NE 19TH AVE APT 14
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D () Delete
Name: FOSTER, MARY
Address: 261 NE 19 AVE APT 4
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: S () Delete
Name: WALTER, BARABASH
Address: 261 NW 19TH AVE APT 6
City-St-Zip: DEERFIELD BEACH, FL 33441

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: FRANKE CAVALLINO

V

04/21/2009

Electronic Signature of Signing Officer or Director

Date