

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2008 8:00 am
Secretary of State

05-19-2008 90036 015 ****61.25

DOCUMENT # N06000009735

1. Entity Name
RIVO AT RINGLING CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
2127 RINGLING BLVD. SUITE 102
16 CHURCH ST
OSPREY, FL 34229

Mailing Address
2127 RINGLING BLVD. SUITE 102
16 CHURCH ST
OSPREY, FL 34229



Lighthouse Property Mgmt.
16 Church Street
Osprey, FL 34229

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16 Church Street
Osprey, FL 34229

01182008 Chg-NP CR2E037 (12/06)

FEI Number
20-5646221

Applied For
Not Applicable

Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, GARY
2127 RINGLING BLVD. SUITE 102
SARASOTA, FL 34237

7. Name and Address of New Registered Agent

Name Gary Johnson
Street Address 1765 Ringling Blvd., Suite 300
Sarasota, FL 34236
City Code

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
CHANGE OF ADDRESS ONLY

SIGNATURE

Filing Fee is \$61.25
Due by May 1, 2008

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

TITLE DP
NAME RIVOLTA, PIERO
STREET ADDRESS 2127 RINGLING BLVD. SUITE 102
CITY-ST-ZIP SARASOTA, FL 34237 ☒ Delete

TITLE DVP
NAME JOHNSON, GARY
STREET ADDRESS 2127 RINGLING BLVD. SUITE 102
CITY-ST-ZIP SARASOTA, FL 34237 ☐ Delete

TITLE AS
NAME KEITH, LLOYD
STREET ADDRESS 16 CHURCH ST
CITY-ST-ZIP OSPREY, FL 34229 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.

TITLE PR
NAME Miriam MacDonald
STREET ADDRESS 1771 Ringling Blvd., #306
CITY-ST-ZIP SARASOTA, FL 34236 ☒ Change ☒ Addition

TITLE TR
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VP
NAME Martha Schantz
STREET ADDRESS 1771 Ringling Blvd., #1206
CITY-ST-ZIP SARASOTA, FL 34236 ☐ Change ☒ Addition

TITLE Secy
NAME Aaron Finegold
STREET ADDRESS 1771 Ringling Blvd., #PH202
CITY-ST-ZIP SARASOTA, FL 34236 ☐ Change ☒ Addition

TITLE DR
NAME Judith Sargent
STREET ADDRESS 1771 Ringling Blvd., #1207
CITY-ST-ZIP SARASOTA, FL 34236 ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/13/08 941 954-0355
Date Daytime Phone