

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012104

FILED
Mar 23, 2009
Secretary of State

Entity Name: RIVERSIDE VILLAS AT CORAL SPRINGS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4800 N STATE ROAD 7
105
LAUDERDALE LAKES, FL 33319

New Principal Place of Business:

Current Mailing Address:

4800 N STATE ROAD 7,
#105
LAUDERDALE LAKES, FL 33319

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ROTH, LEONARDO ESQ.
18851 NE 29TH AVE STE 900
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

PHOENIX, MANAGEMENT
4800 N. STATE RD 7
F-105
LAUDERDALE LAKES, FL 33319 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: SHELDON GOLDBERG

03/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: BOUGHAMMAN, NIDAL
Address: 4511 SHERWOOD TRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: VD () Delete
Name: ANSTEAD, GINNY
Address: 4511 SHERWOOD TRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: TD () Delete
Name: BAIRD, KAREN
Address: 4511 SHERWOOD TRACE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: BOUGHANNAN, NIDAL
Address: 4511 SHERWOOD TRACE
City-St-Zip: GAINESVILLE, FL 32605

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: NIDAL BOUGHANNAN

PSD

03/23/2009

Electronic Signature of Signing Officer or Director

Date