## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N07000004103

FILED Dec 23, 2008 Secretary of State

Entity Name: RIVERVIEW TOWNHOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

300 COLONIAL CENTER PARKWAY SUITE 200 LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

300 COLONIAL CENTER PARKWAY SUITE 200 LAKE MARY, FL 32746

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COLDWELL BANKER COMMERCIAL NRT 901 N LAKE DESTINY DR MAITLAND, FL 32751 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: ROBIN L WEBB

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: WILLS, ERIC K Name: THOMPSON, LEE R

Address: 300 COLONIAL CENTER PARKWAY SUITE 200 Address: 4343 ANCHOR PLAZA PARKWAY, STE 200

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: TAMPA, FL 33634

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: ANDERSON, KATHERINE H Name: MCCOOK, SYLVIA

Address: 300 COLONIAL CENTER PARKWAY SUITE 200 Address: 300 COLONIAL CENTER PARKWAY SUITE 200

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

 Name:
 MAGUIRE, COLLEEN
 Name:
 CAMPBELL, JUSTIN

 Address:
 300 COLONIAL CENTER PARKWAY SUITE 200
 Address:
 300 COLONIAL CENTER PARKWAY SUITE 200

City-St-Zip: LAKE MARY, FL 32746 City-St-Zip: LAKE MARY, FL 32746

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: LEE R. THOMPSON PRES 12/23/2008