2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007538

FILED Jun 16, 2009 Secretary of State

Entity Name: RIVERS LANDING HOMEOWNERS ASSOCIATION OF TALLAHASSEE, INC.

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

2811-E INDUSTRIAL PLAZA DRIVE 4708 CAPITAL CIRCLE NW

TALLAHASSEE, FL 32301 SUITE 1000

TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

2811-E INDUSTRIAL PLAZA DRIVE 4708 CAPITAL CIRCLE NW

TALLAHASSEE, FL 32301 SUITE 1000

TALLAHASSEE, FL 32303

FEI Number: 26-2639229 FEI Number Applied For () 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:

ASBURY, THOMAS
2811-E INDUSTRIAL PLAZA DRIVE
ASBURY, THOMAS
4708 CAPITAL CIRCLE NW

TALLAHASSEE, FL 32301 US SUITE 1000

TALLAHASSEE, FL 32303 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: 06/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: GHAZVINI, BEHZAD Name: GHAZVINI, BEHZAD Address: 2811-E INDUSTRIAL PLAZA DRIVE Address: 4708 CAPITAL CIRCLE NW

City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32303

Title: D () Delete Title: D (X) Change () Addition Name: GHAZVINI, MEHRAN Name: GHAZVINI, MEHRAN

Address: 2811-E INDUSTRIAL PLAZA DRIVE Address: 4708 CAPITAL CIRCLE NW City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32303

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

Name:GHAZVINI, JASONName:GHAZVINI, JASONAddress:2811-E INDUSTRIAL PLAZA DR.Address:4708 CAPITAL CIRCLE NWCity-St-Zip:TALLAHASSEE, FL 32301City-St-Zip:TALLAHASSEE, FL 32303

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: JASON GHAZVINI D 06/16/2009