

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16212

FILED
Apr 15, 2009
Secretary of State

Entity Name: RIO VISTA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5610 N BANANA RIVER BLVD.
COCOA BEACH, FL 32931 US

New Principal Place of Business:

Current Mailing Address:

C/O 204 COCOA BCH CSWY
COCOA BEACH, FL 32931 US

New Mailing Address:

FEI Number: 59-2388445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERA SHOWCASE & INV
204 W COCOA BCH CSWY
C/O KAREN GUNN-BARDOT
COCOA BEACH, FL 32931 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: P () Delete
Name: GALANTE, MICHAEL
Address: 2456 COVONY DRIVE #203
City-St-Zip: MELBOURNE, FL 32935

Title: S () Delete
Name: ANDERSON, HELENA
Address: 2090 N ATLANTIC AVE. # 505
City-St-Zip: COCOA BEACH, FL 32931

Title: VP () Delete
Name: LESMEISTER, PAT
Address: 5801 N ATUANTIE AVE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: MARSHALL, AVELINO
Address: 2049 SHAW DR
City-St-Zip: MERRICK, NY 11566

Title: T () Delete
Name: STABI, YOLONDA
Address: 5660 N BANANA RV BLVD #6
City-St-Zip: COCOA BEACH, FL 32931

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: T (X) Change () Addition
Name: STABILE, YOLANDA
Address: 5660 N BANANA RV BLVD #6
City-St-Zip: COCOA BEACH, FL 32931

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: KAREN E. GUNN-BARDOT

MS

04/15/2009

Electronic Signature of Signing Officer or Director

Date