

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18984

FILED
Feb 17, 2007
Secretary of State

Entity Name: RIVER PARK PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4230 SE 20TH PLACE
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

C/O SILVERCRESTED MGT INC
PO BOX 1848
FT MEYERS, FL 33902 US

New Mailing Address:

FEI Number: 65-0021942 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SILVERCRESTED MGT INC
PO BOX 1848
FORT MYERS, FL 33902 US

Name and Address of New Registered Agent:

SILVERCRESTED MGT INC
3440 MARINATOWN LANE
203
FORT MYERS, FL 33902 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: _____

02/17/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: HAYES, LARRY
Address: 4240 SE 20TH PL., #212
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete
Name: STEINBACK, FREDRECK S
Address: 4240 SE20TH PL #311
City-St-Zip: CAPE CORAL, FL 33904

Title: TD () Delete
Name: CLARK, JANE
Address: 4244 SE 20TH PLACE, #118
City-St-Zip: CAPE CORAL, FL 33904

Title: PD () Delete
Name: MORITZ, LINDA
Address: 4230 SE 20TH PL #206
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Delete
Name: STULL, LYN
Address: 4240 SE 20TH PL, #109
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HAYES, LARRY
Address: 4240 SE 20TH PL., #212
City-St-Zip: CAPE CORAL, FL 33904

Title: VD (X) Change () Addition
Name: COHILL, ERIC
Address: 4240 SE20TH PL #107
City-St-Zip: CAPE CORAL, FL 33904

Title: STD (X) Change () Addition
Name: CLARK, JANE
Address: 4244 SE 20TH PLACE, #118
City-St-Zip: CAPE CORAL, FL 33904

Title: D (X) Change () Addition
Name: BOHACEK, ROBERT
Address: 3303 EVERGREEN LANE
City-St-Zip: EAU CLAIRE, WI 54701

Title: D (X) Change () Addition
Name: STULL, LYNN
Address: 4240 SE 20TH PL, #109
City-St-Zip: CAPE CORAL, FL 33904

I hereby certify that the information supplied with this filing does not qualify for the 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: ERIC COHILL

VD

02/17/2007

Electronic Signature of Signing Officer or Director

Date