

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90006 008 ****61.25

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02062007 Chg-NP CR2E037 (12/06)

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|--|---|---|---|--|--|
| DOCUMENT # N23128 1. Entity Name RIVERSIDE VILLAGE ASSOCIATION, INC. | | | | | |
| Principal Place of Business RIVERSIDE VILLAGE ASSOC INC 9400 US HWY 1 SEBASTIAN, FL 32958 US | | | Mailing Address 956 20TH ST STE 101 VERO BEACH, FL 32960 US | | |
| 2. Principal Place of Business - No P.O. Box # | | 3. Mailing Address 3333 20 STREET | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State VERO BEACH FL | | | |
| Zip | Country | Zip 32960 | Country | 4. FEI Number 59-2938178 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | Applied For <input type="checkbox"/> Not Applicable | |
| 6. Name and Address of Current Registered Agent MANNING, MELODY S 9412 U.S. HWY 1 SEBASTIAN, FL 32958 | | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2007 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| Make check payable to Florida Department of State | | | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P LENCH, LARRY 9400 US HWY 1 #302 SEBASTIAN, FL 32958 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP ROSE, SHANNON 9400 US HWY 1 #204 SEBASTIAN, FL 32958 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST NOWAK, CANDICE 9400 US HWY 1 #404 SEBASTIAN, FL 32958 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HOLLAND, RICK 1140 66TH AVENUE VERO BEACH, FL 32963 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LLOYD, JOHN 9432 US HWY 1 SEBASTIAN, FL 32958 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MCCURDY, DAVE 9540 FRAGGIFANI DR VERO BEACH, FL 32963 | <input type="checkbox"/> Delete | | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | | |
| Date 02/19/07 | | Daytime Phone # | | | |