

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23265

FILED
Mar 26, 2009
Secretary of State

Entity Name: RIVER COVE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

884 SOUTH DILLARD ST.
WINTER GARDEN, FL 34787 US

New Principal Place of Business:

2412 N ESSEX AVE
HERNANDO, FL 34442 US

Current Mailing Address:

884 SOUTH DILLARD ST.
WINTER GARDEN, FL 34787 US

New Mailing Address:

2412 N ESSEX AVE
HERNANDO, FL 34442 US

FEI Number: 59-2954851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASMA, WILLIAM N ESQ
884 S. DILLARD STREET
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

PHILLIPS, HUGH E CPA
2412 N ESSEX AVE
HERNANDO, FL 34442 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: HUGH E PHILLIPS, CPA

03/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AKKERMAN, RUDD
Address: 2580 CHANNEL WAY
City-St-Zip: KISSIMMEE, FL 34747

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: BRUNK, SCOTT
Address: PO BOX 504
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: D () Change (X) Addition
Name: PAINTER, STEVEN
Address: 491 OSPREY LAKES DR
City-St-Zip: CHULUOTA, FL 32766

Title: D () Change (X) Addition
Name: GARCIA, NATHAN
Address: 1553 SE FORT KING ST
City-St-Zip: OCALA, FL 34471

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: SCOTT BRUNK

D

03/26/2009

Electronic Signature of Signing Officer or Director

Date