


attachment 1 of 3

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N30493		
1. Entity Name RIVERSIDE VOA ELDERLY HOUSING, INC.		

08 DEC -5 PM 4:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 2008^{KS}

1124200 REIN-NP CR2E099 (1/03)

Principal Place of Business 740 NW 25TH AVE MIAMI, FL 33125 US	Mailing Address 1660 DUKE ST. ALEXANDRIA, VA 22314 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 58-1835841	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	

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

Laure B. D. H.
Assistant VP

11/24/08

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$236.25
After January 1, 2009, Fee will be \$297.50

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLDER, GERARD <input checked="" type="checkbox"/> Delete 1250 I STREET N.W., SUITE 901 WASHINGTON DC, DC 20005
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUBARSKY, JOSEPH M <input type="checkbox"/> Delete 600 FOXGATE ROAD LOUISVILLE, KY 40223
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATTERSON, WALTER C <input type="checkbox"/> Delete 5950 BERKSHIRE LANE SUITE 1100 DALLAS, TX 75225
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BOWMAN, DAVID T <input type="checkbox"/> Delete 1660 DUKE STREET ALEXANDRIA, VA 22314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCOE DALE, KAREN <input checked="" type="checkbox"/> Delete 1660 DUKE STREET ALEXANDRIA, VA 22314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNIGHT, GEORGE <input checked="" type="checkbox"/> Delete 2181 JAMIESON AVE # 1003 ALEXANDRIA, VA 22314

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PLEASE SEE ATTACHED ADDENDUM <input type="checkbox"/> Change <input type="checkbox"/> Addition FOR COMPLETE LIST OF OFFICERS AND DIRECTORS.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200138511652 12/05/08--01023--011 **\$175.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 10/28/08-01015-019 \$61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

David T. Bowman

David T. Bowman, Secretary/Treasurer (703) 341-7056

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DEC 3 2008

Daytime Phone #

DIRECTORS & OFFICERS
(MASTER HOUSING BOARD)

Mr. Walter C. Patterson, Chair & Director
1660 Duke Street
Alexandria, VA 22314

Ms. Rosemarie Rae, President & Director
1660 Duke Street
Alexandria, VA 22314

Mr. David T. Bowman, Secretary/Treasurer & Director
1660 Duke Street
Alexandria, VA 22314

Mr. Patrick Sheridan, Vice President (not a director)
1660 Duke Street
Alexandria, VA 22314

Mr. Thomas D. Turnbull, Assistant Treasurer (not a director)
1660 Duke Street
Alexandria, VA 22314

Ms. Robin Keller, Assistant Secretary (not a director)
1660 Duke Street
Alexandria, VA 22314

Mr. Shawn M. Bloom, Director
1660 Duke Street
Alexandria, VA 22314

Mr. Wilfred N. Cooper, Sr., Director
1660 Duke Street
Alexandria, VA 22314

Ms. Nancy J. Feldman, Director
1660 Duke Street
Alexandria, VA 22314

Dr. Russell Holman, Director
1660 Duke Street
Alexandria, VA 22314

Mr. Joseph M. Lubarsky, Director
1660 Duke Street
Alexandria, VA 22314

DIRECTORS & OFFICERS
(MASTER HOUSING BOARD)

Mr. John Morland, Director
1660 Duke Street
Alexandria, VA 22314

Mr. Matt J. Nelson, Director
1660 Duke Street
Alexandria, VA 22314

Ms. Ann B. Schnare, Director
1660 Duke Street
Alexandria, VA 22314