

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34149

FILED
Apr 30, 2009
Secretary of State

Entity Name: LA RIVE SUD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2646 NW 4TH ST.
FORT LAUDERDALE, FL 33311 US

New Principal Place of Business:

15751 SHERIDAN ST.
FORT LAUDERDALE, FL 33331 US

Current Mailing Address:

624 CAMBRIDGE TERR
WESTON, FL 33326 US

New Mailing Address:

FEI Number: 65-0178550 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

NACHMAN, IRVIN W
4441 STIRLING RD.
FORT LAUDERDALE, FL 33314 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: TRENCH, GABRIELA
Address: 624 CAMBRIDGE TERR
City-St-Zip: WESTON, FL 33326 US

Title: T () Delete
Name: KLEINMAN RABIN, SILVIA
Address: 4342 BEEMAN AVE
City-St-Zip: STUDIO CITY, CA 91604 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: KLEINMAN RABIN, SILVIA
Address: 4342 BEEMAN AVE
City-St-Zip: STUDIO CITY, CA 91604 US

Title: T () Change (X) Addition
Name: SYVERSEN, STEINAR
Address: 49 SW 14 STREET
City-St-Zip: DANIA BEACH, FL 33004

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: GABRIELA TRENCH

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date