2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# N40655

Entity Name: NEW RIVER CENTER MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business:

333 LAS OLAS WAY
MANAGEMENT OFFICE
FORT LAUDERDALE, FL 33301 US

New Principal Place of Business:

Current Mailing Address:

333 LAS OLAS WAY
MANAGEMENT OFFICE
FORT LAUDERDALE, FL 33301 US

New Mailing Address:

FEI Number: 65-0245621 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NELSON, FABIENNE
C/O CB RICHARD ELLIS, INC
200 E LAS OLAS BLVD, STE 1630
FORT LAUDERDALE, FL 33301 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: POMERANZ, EDWARD L
Address: 333 LAS OLAS WAY
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP ( ) Delete
Name: TOAL, JUSTIN
Address: 221 W 6TH ST, STE 1900
City-St-Zip: AUSTIN, TX 78701

Title: ST ( ) Delete
Name: NELSON, FABIENNE
Address: 200 E LAS OLAS BLVD STE 1630
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: QUAINTANCE, JOHN
Address: 333 LAS OLAS WAY
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP (X) Change ( ) Addition
Name: VANDERWERFF, MATTHEW
Address: 4775 COLLINS AVE SUITE 3204
City-St-Zip: MIAMI BEACH, FL 33140

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

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: JOHN QUAINTANCE P 03/27/2009
Electronic Signature of Signing Officer or Director — Date