

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44970

FILED  
Feb 03, 2009  
Secretary of State

Entity Name: RIVERWALK PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

PALM STATE MANAGEMENT  
6385 PRESIDENTIAL CT #101  
FORT MYERS, FL 33919 US

**New Principal Place of Business:**

**Current Mailing Address:**

6385 PRESIDENTIAL CT  
STE 101  
FORT MYERS, FL 33919 US

**New Mailing Address:**

FEI Number: 65-0321952      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COPELAND, WILLIAM G  
6385 PRESIDENTIAL CT  
STE 101  
FORT MYERS, FL 33919 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: D ( ) Delete  
Name: SORENSON, ANDY  
Address: 10481 SIX MILE CYPRESS  
City-St-Zip: FORT MYERS, FL 33912 US

Title: D ( ) Delete  
Name: VILLAR, GABRIEL  
Address: 11030 N KENDALL DR #100  
City-St-Zip: MIAMI, FL 33176 US

Title: D ( ) Delete  
Name: DANZIG, MIKE  
Address: 8540 COLLEGE PKWY  
City-St-Zip: FORT MYERS, FL 33919 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: WILLIAM G. COPELAND

Electronic Signature of Signing Officer or Director

MGR

02/03/2009

\_\_\_\_\_ Date