

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45508

FILED
Apr 13, 2009
Secretary of State

Entity Name: NORTH RIVER INTERCHANGE PARK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8441 COOPER CREEK BLVD
UNIVERSITY PARK, FL 34201

New Principal Place of Business:

Current Mailing Address:

8441 COOPER CREEK BLVD.
UNIVERSITY PARK, FL 34201

New Mailing Address:

FEI Number: 65-0408591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAYTON, ALICIA H ESQ
8441 COOPER CREEK BLVD
UNIVERSITY PARK, FL 34201 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: PD () Delete
Name: BALDAUF, DAVID H
Address: 8441 COOPER CREEK BLVD
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: STD () Delete
Name: SPANOS, ROBERT
Address: 8441 COOPER CREEK BLVD
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: D () Delete
Name: GAYTON, ALICIA H ESQ
Address: 8441 COOPER CREEK BLVD.
City-St-Zip: UNIVERSITY PARK, FL 34201

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: DAVID H BALDAUF

PD

04/13/2009

Electronic Signature of Signing Officer or Director

Date