

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 25, 2009  
Secretary of State**

DOCUMENT# N47301

Entity Name: RIVERSIDE ESTATE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

<UNUSED>  
ORLANDO, FL 32825 US

**Current Mailing Address:**

**New Mailing Address:**

P.O. BOX 678817  
ORLANDO, FL 32867

FEI Number: 59-3144924      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

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

GARCHINSKY, JOE  
806 RIVER COVE  
ORLANDO, FL 32825 US

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:**

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

Title: P ( ) Delete  
Name: MCCRAY, VICTORIA  
Address: 812 ISLANDER AVENUE  
City-St-Zip: ORLANDO, FL 32825 US

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

Title: S ( ) Delete  
Name: GEISLER, KAREN L  
Address: 807 ISLANDER AVENUE  
City-St-Zip: ORLANDO, FL 32825 US

Title: S (X) Change ( ) Addition  
Name: SERT, PIPER  
Address: 811 RIVER COVE AVE  
City-St-Zip: ORLANDO, FL 32825 US

Title: D ( ) Delete  
Name: HAWK, VICKI  
Address: 825 ISLANDER AVE.  
City-St-Zip: ORLANDO, FL 32825

Title: D (X) Change ( ) Addition  
Name: SCHULTZ, VICTORIA  
Address: 848 RIVER COVE AVE.  
City-St-Zip: ORLANDO, FL 32825

Title: T ( ) Delete  
Name: GARSHINSKY, JOE  
Address: 806 RIVER COVE  
City-St-Zip: ORLANDO, FL 32825

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

Title: D ( ) Delete  
Name: VELLER, CONNIE  
Address: 10027 SANDBAR ST.  
City-St-Zip: ORLANDO, FL 32825

Title: D (X) Change ( ) Addition  
Name: GONZALEZ, JOSE  
Address: 10008 LITTLE TEAK ST.  
City-St-Zip: ORLANDO, FL 32825

Title: D (X) Delete  
Name: THOMPSON, RICHARD  
Address: 915 ISLANDER AVENUE  
City-St-Zip: ORLANDO, FL 32825

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: JOSEPH K. GARCHINSKY

T

02/25/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date