

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003528

FILED
Apr 03, 2009
Secretary of State

Entity Name: RIVERSIDE WALK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

934 N UNIVERSITY DR
STE 224
CORAL SPGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

934 N UNIVERSITY DR
STE 224
POMPANO BEACH, FL 33071 US

New Mailing Address:

FEI Number: 65-0603132

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESPADA, WILFREDO
9846 NW 1ST MANOR
CORAL SPRINGS, FL 33071 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: DP () Delete
Name: LEE, ANDREW
Address: 191 NW 97TH TERR
City-St-Zip: CORAL SPGS, FL 33071

Title: DV () Delete
Name: FRISICARO, CHRISTINA
Address: 9700 NW 1ST MANOR
City-St-Zip: CORAL SPGS, FL 33071

Title: DS () Delete
Name: FENIMORE, DIANA
Address: 9791 NW 2ND STREET
City-St-Zip: CORAL SPGS, FL 33071

Title: D () Delete
Name: MOY, DENNIS
Address: 153 NW 97TH TERR
City-St-Zip: CORAL SPGS, FL 33071

Title: DT () Delete
Name: ESPADA, WILFREDO
Address: 9846 NW 1ST MANOR
City-St-Zip: CORAL SPGS, FL 33071

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:

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: WILFREDO ESPADA

DT

04/03/2009

Electronic Signature of Signing Officer or Director

Date