2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2009
Secretary of State

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Entity Name: RIVERPOINT PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2501 27TH AVENUE, SUITE F-11
VERO BEACH, FL 32960 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 650429
VERO BEACH, FL 32965 US

New Mailing Address:

FEI Number: 65-0778674 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RULE, LISA A
2501 27TH AVENUE,
SUITE F-11
VERO BCH, FL 32960 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:	DS	( ) Delete
Name:	BROWN, CALVIN	
Address:	680 23RD ST SE	
City-St-Zip:	VERO BEACH, FL 32962 US	
Title:	DT	( ) Delete
Name:	REISING, JOE	
Address:	2265 6TH COURT SE	
City-St-Zip:	VERO BEACH, FL 32962 US	
Title:	DP	( ) Delete
Name:	GONZALEZ, ALEX	
Address:	2170 6TH COURT SE	
City-St-Zip:	VERO BEACH, FL 32962 US	
Title:	DV	( ) Delete
Name:	LANDERS, DENIELLE	
Address:	2185 7TH AVENUE SE	
City-St-Zip:	VERO BEACH, FL 32962 US	
Title:	D	( ) Delete
Name:	HOLLENBECK, LARRY	
Address:	2185 6TH CT SE	
City-St-Zip:	VERO BEACH, FL 32962 US	
Title:	M	( ) Delete
Name:	RULE, LISA A	
Address:	2501 27TH AVENUE, SUITE F-11	
City-St-Zip:	VERO BEACH, FL 32960	

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:	
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: LISA RULE M 04/27/2009

Electronic Signature of Signing Officer or Director — Date