## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000004198

FILED Feb 14, 2008 Secretary of State

Entity Name: RIVER-GOLF TOWNHOUSES ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2430 S PENINSULA DRIVE DAYTONA BEACH, FL 32118 **Current Mailing Address: New Mailing Address:** P O B 7203 P O B 7203 DAYTONA BEACH, FL 32116 DAYTONA BEACH, FL 32116 US FEI Number: 59-3482963 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: CHOPORIS, CHRISTOPHER C 2430 S PENÍNSULA DRIVE DAYTONA BEACH, FL 32118 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: ( ) Delete (X) Change ( ) Addition CHOPORIS, CHRISTOPHER C CHOPORIS, CHRISTOPHER C Name: Name: 2430 S PENINSULA DRIVE Address: 2430 S PENINSULA DRIVE Address: City-St-Zip: DAYTONA BEACH, FL 32118 City-St-Zip: DAYTONA BEACH, FL 32118 US Title: DST ( ) Delete Title: () Change () Addition Name: KLEM, PHIL Name: Address: 2430 S PENINSULA DR Address: City-St-Zip: BOYTON BEACH, FL City-St-Zip: Title: PD() Delete Title: () Change () Addition HAWKS, JIM Name: Name: Address: 27435 ST. LUCIE LANE Address: City-St-Zip: SUMMERLAND KEY, FL 33042 City-St-Zip: Title: SD ( ) Delete Title: () Change () Addition Name: GREEN, BARBARA Name: Address: 39 TWIN RIVER DRIVE Address: City-St-Zip: ORMOND BEACH, FL 32174 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: CHRISTOPHER C. CHOPORIS SEC. 02/14/2008