

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000162246

Entity Name: EAST RIVER ADVISORS, INC.

FILED  
Mar 12, 2009  
Secretary of State

**Current Principal Place of Business:**

4287 LAFAYETTE STREET  
MARIANNA, FL 32446

**New Principal Place of Business:**

13835 N TATUM BLVD., SUITE 9519  
PHOENIX, AZ 85032

FEI Number: 20-3908896

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TUCKER, BYRON  
4287 LAFAYETTE STREET  
MARIANNA, FL 32446 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PDTS ( ) Delete  
Name: TUCKER, BYRON  
Address: 516 LORI LANE  
City-St-Zip: ALFORD, FL 32420

Title: ASAT ( ) Delete  
Name: ALVAREZ, LUCI  
Address: 1220 E TOPEKA DR.  
City-St-Zip: PHOENIX, AZ 85024

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BYRON TUCKER

MR

03/12/2009

Electronic Signature of Signing Officer or Director

Date