2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000022018

Entity Name: RIVE ISLE REALTY, INC

Name:

Address:

City-St-Zip:

VERNON, JANÉ D

2600 DOUGLAS RD STE 505

CORAL GABLES, FL 33134

FILED Apr 30, 2009 Secretary of State

Entity Nan	ne: RIVE ISI	LE REALTY, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
11820 RIVE PARRISH,	E ISLE RUN FL 34219	US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2600 DOU	GLAS RD				
	ABLES, FL 3	3134 US			
FEI Number:	65-0568752	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:					
10225 ULM SUITE 2	LT, KENNET 1ERTON RO _ 34641 US				
The above in the State		submits this statement for	or the purpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ed Agent	Date	
Election Can	npaign Financii	ng Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VERNON, WIL 2600 DOUGL) Delete LLIAM G AS RD STE 505 ES, FL 33134	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SPORL, LYNE 2600 DOUGL) Delete ETTE AS RD STE 505 ES, FL 33134	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	ST () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: WILLIAM G. VERNON PD 04/30/2009