

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N49881

**Entity Name:** SOUTH RIVER SHORES ASSOCIATION, INC.

**Current Principal Place of Business:**

2608 SW RIVER SHORE DR.  
PORT ST. LUCIE, FL 34984

**Current Mailing Address:**

PO BOX 7454  
PORT ST. LUCIE, FL 34985

**FEI Number:** 65-0295962

**Certificate of Status Desired:** No

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

BECKER AND POLIAKOFF  
1100 SW ST. LUCIE WEST BLVD  
PORT ST. LUCIE, FL 34986 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:** JANE CORNETT

03/05/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, AND ARC  
Name            ALVAREZ, JOE  
Address        PO BOX 7454  
City-State-Zip: PORT ST. LUCIE FL 34985

Title            VSP  
Name            RITTENHOUSE, WATSON  
Address        PO BOX 7454  
City-State-Zip: PORT ST. LUCIE FL 34985

Title            TREA  
Name            REINA, GEORGE A  
Address        PO BOX 7454  
City-State-Zip: PORT ST. LUCIE FL 34985

Title            SEC  
Name            SMITH, JOHN  
Address        PO BOX 7454  
City-State-Zip: PORT ST. LUCIE FL 34985

*I hereby 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 all other like empowered.*

**SIGNATURE:** JOE ALVAREZ

**PRESIDENT**

03/05/2015

Electronic Signature of Signing Officer/Director Detail

Date