

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 06, 2006 8:00 am**  
**Secretary of State**

02-06-2006 90081 020 \*\*\*150.00

**DOCUMENT # 590934**

1. Entity Name  
**RIVES & RIVES, P.A.**



Principal Place of Business Mailing Address  
**1265 S.MYRTLE AVE. 1265 S.MYRTLE AVE.**  
**CLEARWATER, FL 3375 US CLEARWATER, FL 33756 US**

2. Principal Place of Business 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
City & State City & State  
Zip Country Zip Country



01192006 Chg-P CR2E034 (11/05)

4. FEI Number **59-1856101** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**RIVES, HOWARD P., III**  
**1265 S.MYRTLE AVE.**  
**CLEARWATER, FL 33756**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when renating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '11			
TITLE	PSD	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RIVES, HOWARD P III			NAME			
STREET ADDRESS	1265 S.MYRTLE AVE.			STREET ADDRESS			
CITY - ST - ZIP	CLEARWATER, FL 33756			CITY - ST - ZIP			
TITLE	VP	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RIVES, MARIE T.			NAME			
STREET ADDRESS	1265 S. MYRTLE AVE.			STREET ADDRESS			
CITY - ST - ZIP	CLEARWATER, FL 33756			CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *[Signature]* **President** **January 19 2006** **727 4412456**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

#590934

40008807

**RIVES & RIVES, P.A.**  
ATTORNEYS AT LAW

HOWARD P. RIVES, III  
MARIE T. RIVES\*

A. DALLAS ALBRITTON  
Of Counsel

\* Certified Mediator

1265 SOUTH MYRTLE AVENUE  
CLEARWATER, FLORIDA 33756

TELEPHONE: (727) 441-2456  
FAX: (727) 442-6844

February 2, 2006

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

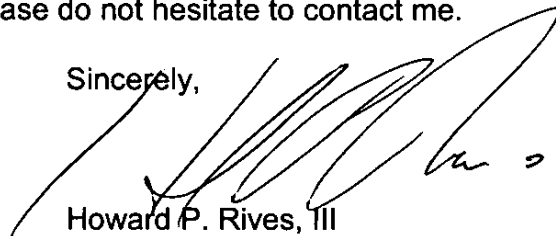
In Re: 2006 for Profit Corporation Annual Report

Dear Sir or Madam:

Enclosed herewith is the 2006 for Profit Corporation Annual Report plus our check #5237 in the amount of \$150.00.

Should you have any questions, please do not hesitate to contact me.

Sincerely,



Howard P. Rives, III

HPR/rah  
Enclosures