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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 701785

1. Corporation Name
RIVERA BAY CIVIC ASSOCIATION, INC.

Principal Place of Business: 9795 1ST N.E. ST. PETERSBURG FL 33702 US
Mailing Address: 9795 1ST ST NE ST. PETERSBURG FL 33702 US

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2. Principal Place of Business: 21 101 87th Ave N, 22 St Petersburg FL, 23 St. Petersburg FL, 24 33702, 25 USA
2a. Mailing Address: 26 101 87th Ave N, 27 Suite, Apt. #, etc., 28 St. Petersburg FL, 29 33702, 30 USA
3. Date Incorporated or Qualified: 12/10/1960
4. FEI Number: 59-2742119
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent: NEWCOMB, MADELINE, 9795 1 ST. N.E., ST. PETERSBURG FL 33702
10. Name and Address of New Registered Agent: 81 Name: R. Scott Rabun, 82 Street Address (P.O. Box Number is Not Acceptable): 101 87th Ave N, 84 City: St Petersburg, FL, 85 Zip Code: 33702

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE: [Signature] K. SCOTT RABUN, DATE: 2/3/99

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|-----------------------------------|--------------------------------|---|---|
| TITLE: P | NAME: NEWCOMB, MADELINE | 1.1 TITLE: PRES & D | 1.2 NAME: RABUN, SCOTT |
| STREET ADDRESS: 9795 1ST N.E. | CITY-ST-ZIP: ST. PETERSBURG FL | 1.3 STREET ADDRESS: 101 87TH AVENUE N. | 1.4 CITY-ST-ZIP: ST. PETERSBURG, FL |
| TITLE: VP | NAME: RABUN, SCOTT | 2.1 TITLE: VP PRES & D | 2.2 NAME: NEWCOMB, MADELINE |
| STREET ADDRESS: 101 87TH ST NE | CITY-ST-ZIP: ST PETE FL | 2.3 STREET ADDRESS: 9795 1ST ST NE | 2.4 CITY-ST-ZIP: ST. PETERSBURG, FL |
| TITLE: S & D | NAME: LORENT, AMY | 3.1 TITLE: SEC & D | 3.2 NAME: RABUN, AMY D |
| STREET ADDRESS: 101 87TH ST NE | CITY-ST-ZIP: ST PETE FL | 3.3 STREET ADDRESS: 101 87TH AVENUE N. | 3.4 CITY-ST-ZIP: ST. PETERSBURG, FL |
| TITLE: T | NAME: WEISENBURG, MARC | 4.1 TITLE: TREAS & D | 4.2 NAME: KILLEN, C.W. D |
| STREET ADDRESS: 100 98TH AVE. N. | CITY-ST-ZIP: ST. PETERSBURG FL | 4.3 STREET ADDRESS: 9667 TREASURE LANE, N.E. | 4.4 CITY-ST-ZIP: ST. PETERSBURG, FL 33702 |
| TITLE: D | NAME: FOSTER, PAULINE | 5.1 TITLE: | 5.2 NAME: |
| STREET ADDRESS: 335 89TH AVENUE N | CITY-ST-ZIP: ST. PETERSBURG FL | 5.3 STREET ADDRESS: | 5.4 CITY-ST-ZIP: |
| TITLE: D | NAME: NEWCOMB, RICHARD | 6.1 TITLE: | 6.2 NAME: |
| STREET ADDRESS: 9795 1ST ST NE | CITY-ST-ZIP: ST PETE FL | 6.3 STREET ADDRESS: | 6.4 CITY-ST-ZIP: |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.
SIGNATURE: [Signature] K. SCOTT RABUN, DATE: 2/3/99 (727) 576-2226

CR2E037 (11/98)