2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2002 8:00 AM
Secretary of State

DOCUMENT# 703442

Entity Name: RIO - MAR APARTMENTS INC

Current Principal Place of Business:

3232 CANAL DRIVE
P O BOX 5193
LIGHTHOUSE POINT, FL 33074

New Principal Place of Business:

Current Mailing Address:

3232 CANAL DRIVE
P O BOX 5193
LIGHTHOUSE POINT, FL 33074

New Mailing Address:

FEI Number: 59-1031935 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WELSH, CAROLYN
3232 CANAL DRIVE
APT. 19
POMPANO BEACH, FL 33062 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

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	EATON, CLAIRE	
Address:	3232 CANAL DRIVE	
City-St-Zip:	POMPANO BEACH, FL 33062	
Title:	D	( ) Delete
Name:	FREER, VIRGINIA	
Address:	3232 CANAL DR	
City-St-Zip:	POMPANO BEACH, FL 33062	
Title:	STD	( ) Delete
Name:	WELSH, CAROLYN,	
Address:	3232 CANAL DRIVE	
City-St-Zip:	POMPANO BEACH, FL 00000,	
Title:	VP	( ) Delete
Name:	WHEELEY, MAURICE	
Address:	3232 CANAL DR	
City-St-Zip:	POMPANO BEACH, FL 33062	
Title:	D	( ) Delete
Name:	WAGNER, FRANK	
Address:	3232 CANAL DRIVE	
City-St-Zip:	POMPANO BEACH, FL 33062	
Title:	PD	( ) Delete
Name:	WAGNER, FRANK	
Address:	3232 CANAL DR	
City-St-Zip:	POMPANO BEACH, FL 33062	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK WAGNER PD 01/15/2002

Electronic Signature of Signing Officer or Director — Date