

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703442

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: RIO - MAR APARTMENTS INC

**Current Principal Place of Business:**

3232 CANAL DRIVE  
POMPANO BEACH, FL 33062

**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. 7  
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: P/D ( ) Delete  
Name: LUMPKIN, WILLIAM P/D  
Address: 3232 CANAL DRIVE  
City-St-Zip: POMPANO BEACH, FL 33062

Title: D ( ) Delete  
Name: WAGNER, FRANK D  
Address: 3232 CANAL DR  
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: ST/D ( ) Delete  
Name: WELSH, CAROLYN ST/D  
Address: 3232 CANAL DRIVE  
City-St-Zip: POMPANO BEACH,, FL 33062 US

Title: VP/D ( ) Delete  
Name: CAVALLARO, CHARLES VP/D  
Address: 3232 CANAL DR  
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: D ( ) Delete  
Name: RIGHTER, GAIL D  
Address: 3232 CANAL DRIVE  
City-St-Zip: POMPANO BEACH, FL 33062 US

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK WAGNER

D

01/09/2007

Electronic Signature of Signing Officer or Director

Date