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Mar 24 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 706361 (3)  
1. Corporation Name  
RIVERSIDE IMPROVEMENT ASSOCIATION, INC.



Principal Place of Business Mailing Address  
25 VAN ROAD JUPITER FL 33469

3. Date Incorporated or Qualified  
11/01/1963

4. FEI Number 59-6200172 Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?  Yes  No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent  
COLLISTER, DONALD  
1504 TREMONT AVE  
JUPITER FL 33469

10. Name and Address of New Registered Agent

81 Name Rudolph, Mary

82 Street Address (P.O. Box Number is Not Acceptable)  
10 West Van Rd

83

84 City Jupiter, FL 85 Zip Code 33469

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 Mary Rudolph 3/2/98  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

|                |                         |  |
|----------------|-------------------------|--|
| TITLE          | V                       | <input type="checkbox"/> DELETE            |
| NAME           | RUDOLPH, MARY           |  |
| STREET ADDRESS | 10 W VAN RD             |  |
| CITY-ST-ZIP    | JUPITER FL 33469        |  |
| TITLE          | P                       | <input checked="" type="checkbox"/> DELETE |
| NAME           | COLLISTER, DONALD       |  |
| STREET ADDRESS | 1504 TREMONT AVE        |  |
| CITY-ST-ZIP    | JUPITER FL 33469        |  |
| TITLE          | D                       | <input type="checkbox"/> DELETE            |
| NAME           | SMYKA, PETER            |  |
| STREET ADDRESS | 1506 VENUS AVE          |  |
| CITY-ST-ZIP    | JUPITER FL              |  |
| TITLE          | T                       | <input type="checkbox"/> DELETE            |
| NAME           | MAGUIRE, NANCY          |  |
| STREET ADDRESS | 105 VAN RD.             |  |
| CITY-ST-ZIP    | JUPITER FL              |  |
| TITLE          | S                       | <input checked="" type="checkbox"/> DELETE |
| NAME           | SPRINGTHORPE, ANN       |  |
| STREET ADDRESS | 141 RIVERSIDE DR. APT24 |  |
| CITY-ST-ZIP    | JUPITER FL              |  |
| TITLE          | D                       | <input type="checkbox"/> DELETE            |
| NAME           | TURRALL, IRIS           |  |
| STREET ADDRESS | 1611 VENUS AVE          |  |
| CITY-ST-ZIP    | JUPITER FL 33469        |  |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |  |
|--------------------|--|
| 1.1 TITLE          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME           | Rudolph, Mary  |
| 1.3 STREET ADDRESS | 10 W. Van Rd   |
| 1.4 CITY-ST-ZIP    | Jupiter, FL 33469  |
| 2.1 TITLE          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME           | Vaylward, Mildred  |
| 2.3 STREET ADDRESS | 359 Saturn Ave   |
| 2.4 CITY-ST-ZIP    | Mari Tequesta, FL 33469  |
| 3.1 TITLE          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME           | S. Hofmeister, Eliza   |
| 3.3 STREET ADDRESS | 205 Circle West  |
| 3.4 CITY-ST-ZIP    | Jupiter, FL 33458  |
| 4.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 4.2 NAME           | T. Maguire, Nancy  |
| 4.3 STREET ADDRESS | 105 Van Rd   |
| 4.4 CITY-ST-ZIP    | Jupiter, FL 33469  |
| 5.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 5.2 NAME           | D Iris Turrall   |
| 5.3 STREET ADDRESS | 1611 Venus Ave   |
| 5.4 CITY-ST-ZIP    | Jupiter, FL 33469  |
| 6.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 6.2 NAME           | D Smyka, Peter   |
| 6.3 STREET ADDRESS | 1506 Venus Ave   |
| 6.4 CITY-ST-ZIP    | Jupiter, FL 33469  |

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mary Rudolph Mary Rudolph 561-746-8011

CF2E037 (10/97)