


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 12, 2003 8:00 am
Secretary of State

02-27-2003 90149 009 ****61.25

DOCUMENT # 706361

1. Entity Name
RIVERSIDE IMPROVEMENT ASSOCIATION, INC.



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

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Zip Country Zip Country

4. FEI Number **59-6200172** Applied For
Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
MANNER, BETTE
7 C TURTLE CREEK DR
JUPITER FL 33469

7. Name and Address of New Registered Agent
Name **ED COLLINS**
Street Address (P.O. Box Number is Not Acceptable)
1506 BERKSHIRE AVE
City **JUPITER - FL** FL Zip Code **33469**

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  **EDWARD P. COLLINS III** DATE **2/18/03**

Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees** Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MANNER, BETTE	
STREET ADDRESS	7 C TURTLE CREEK	
CITY-ST-ZIP	JUPITER FL 33469	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	GORDON, MARION	
STREET ADDRESS	901 ELM CIRCLE	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	MAGUIRE, NANCY	
STREET ADDRESS	105 VAN RD	
CITY-ST-ZIP	JUPITER FL 33469	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HANSEN, EDEL	
STREET ADDRESS	10479 N 158 STREET	
CITY-ST-ZIP	JUPITER FL 33478	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT - (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ED COLLINS	
STREET ADDRESS	1506 BERKSHIRE AVE	
CITY-ST-ZIP	JUPITER, FL. 33469	
TITLE	VICE-PRESIDENT/TREASURER - (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PETER GEBAUER	
STREET ADDRESS	1507 BERKSHIRE AVE	
CITY-ST-ZIP	JUPITER, FL. 33469	
TITLE	SECRETARY - (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PHILIP CIPOLLA	
STREET ADDRESS	1420 BERKSHIRE AVE	
CITY-ST-ZIP	JUPITER, FL. 33469	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental reports 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **PETER GEBAUER** DATE **2/18/03** DAYTIME PHONE # **561-748-7536**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)