

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 726933

FILED
Apr 22, 2002 8:00 AM
Secretary of State

Entity Name: RIVERBEND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9300 SE RIVERFRONT TERRACE
TEQUESTA, FL 33469

New Principal Place of Business:

Current Mailing Address:

9300 SE RIVERFRONT TERRACE
TEQUESTA, FL 33469

New Mailing Address:

FEI Number: 59-1567540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNETT, J L
401 E OSCEOLA ST
1ST FL
STUART, FL 34994 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: PD () Delete
Name: MCBRIDE, JOHN
Address: AUGUSTA G - 9190 SE RIVERFRONT TERR
City-St-Zip: TEQUESTA, FL 33469

Title: VD () Delete
Name: ZINGHINI, FRANK
Address: WENTWORTH H-3249 SE RIVERFRONT TERRACE
City-St-Zip: TEQUESTA, FL 33456

Title: STD () Delete
Name: SCHMIDT, JOHN
Address: COLONIAL J- 18459 SE WOOD HAVEN LANE
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: PASCOE, KENNETH
Address: ST ANDREWS G - 18460 SE WOOD HAVEN LANE
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: GOMEZ, ROSEMARY
Address: OAKMONT F - 9179 SE RIVERFRONT TERR
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: SCHULTE, JOHN
Address: 18590 SE WOOD HAVEN LANE
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCBRIDE, JOHN S
Address: AUGUSTA G - 9190 SE RIVERFRONT TERR
City-St-Zip: TEQUESTA, FL 33469

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: SCHMIDT, JOHN
Address: COLONIAL J- 18459 SE WOOD HAVEN LANE
City-St-Zip: TEQUESTA, FL 33469

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: JOHN S MCBRIDE

PD

04/22/2002

Electronic Signature of Signing Officer or Director

Date

BARBARA BASSO, SECRETARY
PLANTATION L
18550 SE WOOD HAVEN LANE
TEQUESTA, FL 33469

BARBARA BASSO, SECRETARY
PLANTATION L