2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#729918

Entity Name: RIVERSIDE-AVONDALE PRESERVATION, INC.

FILED May 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2623 HERSCHEL ST

JACKSONVILLE, FL 32204 US

Current Mailing Address: New Mailing Address:

2623 HERSCHEL ST

JACKSONVILLE, FL 32204 US

FEI Number: 59-6555835 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GRISSETT, BONNIE T 2623 HERSCHEL ST JACKSONVILLE, FL 32204

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:

NL.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

Name: STANLY, WILLIAM A
Address: 3675 PINE ST.

Name: STANLY, WILLIAM A
Address: 3675 PINE ST.

City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 PURDIE, JOANN F
 Name:
 PURDIE, JOANN F

 Address:
 2210 ST JOHNS AVE
 Address:
 2210 ST JOHNS AVE

City-St-Zip: JACKSONVILLE, FL 32204 City-St-Zip: JACKSONVILLE, FL 32204 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 HAKINS, DAVID
 Name:
 GUY, CYNTHIA

 Address:
 4958 ORTEGA BLVD.
 Address:
 1402 EDGEWOOD AVE

 City-St-Zip:
 JACKSONVILLE, FL 32210
 City-St-Zip:
 JACKSONVILLE, FL 32205 US

Title: D () Delete Title: D (X) Change () Addition

Name: GUY, CYNTHIA Name: WILLIAMS, RILEY
Address: 1402 EDGEWOOD AVE. Address: 1271 WINDSOR PL

City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205 US

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MEADOWS, KIM
 Name:
 MEADOWS, KIM

 Address:
 3856 ELOISE ST.
 Address:
 3856 ELOISE ST.

City-St-Zip: JACKSONVILLE, FL 32205 City-St-Zip: JACKSONVILLE, FL 32205 US

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 BOWEN, GREGORY

 Address:
 Address:
 1384 BELVEDERE AVE

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32205 US

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: WILLIAM A STANLY P 05/05/2004