


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
—Mar 12, 2004 08:00 AM
Secretary of State

DOCUMENT # 750955 1. Entity Name RIVERVIEW CONDOMINIUM ASSOCIATION OF VERO BEACH, INC.																																																																																																																													
Principal Place of Business 2333 INDIAN RIVER BLVD. #604 VERO BEACH FL 32960 US			Mailing Address 2333 INDIAN RIVER BLVD. #604 VERO BEACH FL 32960 US																																																																																																																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																																																																										
City & State Zip Country			City & State Zip Country																																																																																																																										
4. FEI Number 59-2008093			Applied For <input type="checkbox"/> Not Applicable																																																																																																																										
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required																																																																																																																										
6. Name and Address of Current Registered Agent STEGE, NORBERT 2333 INDIAN RIVER BLVD. #204 VERO BEACH FL 32960				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																																									
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 <u><i>Norbert Stege</i></u> DATE <u>3-8-04</u> <small>Signature, typed or printed name of registered agent and this if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																													
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																									
Make Check Payable to Florida Department of State																																																																																																																													
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">SD</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>STEGE, NORBERT</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2333 INDIAN RIVER BLVD #204</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>VERO BEACH FL 32960</td> <td></td> </tr> <tr> <td>TITLE</td> <td>PD</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>BACKUS, MERIL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2333 INDIAN RIVER BLVD. #403</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>VERO BEACH FL 32960</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VPD</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>TRACY, GEORGE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2333 INDIAN RIVER BLVD #506</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>VERO BEACH FL 32960</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>CLAUDIO PATANE'</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2333 INDIAN RIVER BLVD. #201</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>VERO BEACH, FL. 32960</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>AS</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>NANCY RICHARDS</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>677 ROYAL PALM BLVD. #11</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>VERO BEACH, FL. 32960</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"></td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	SD	<input type="checkbox"/> Delete	NAME	STEGE, NORBERT		STREET ADDRESS	2333 INDIAN RIVER BLVD #204		CITY- ST- ZIP	VERO BEACH FL 32960		TITLE	PD	<input type="checkbox"/> Delete	NAME	BACKUS, MERIL		STREET ADDRESS	2333 INDIAN RIVER BLVD. #403		CITY- ST- ZIP	VERO BEACH FL 32960		TITLE	VPD	<input type="checkbox"/> Delete	NAME	TRACY, GEORGE		STREET ADDRESS	2333 INDIAN RIVER BLVD #506		CITY- ST- ZIP	VERO BEACH FL 32960		TITLE		<input type="checkbox"/> Delete	NAME	CLAUDIO PATANE'		STREET ADDRESS	2333 INDIAN RIVER BLVD. #201		CITY- ST- ZIP	VERO BEACH, FL. 32960		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY- ST- ZIP			TITLE	AS	<input type="checkbox"/> Delete	NAME	NANCY RICHARDS		STREET ADDRESS	677 ROYAL PALM BLVD. #11		CITY- ST- ZIP	VERO BEACH, FL. 32960		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			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		
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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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Norbert Stege*

3-8-04