

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
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95 JUN 28 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400001527254
-06/29/95--01069--012
****155.00 ****155.00

DO NOT WRITE IN THIS SPACE.

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

DOCUMENT # 756305
1. Corporation Name
RIVERSIDE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2711 N HALIFAX AVE DAYTONA BEACH FL 32118	2711 N HALIFAX AVE DAYTONA BEACH FL 32118

3. Date Incorporated or Qualified 02/11/81	3a. Date of Last Report 05/01/94
------------------------------------------------------	--------------------------------------------

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	25 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29

4. FEI Number 59-2088223	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**RL REIMER, COSMAC, INC.
RT. 5, BOX 212-1
DAYTONA BEACH FL 32019**

10. Name and Address of New Registered Agent

81 Name BECKER & POLIAROFF, P.A. c/o HELENA G. MALCHOW, ESQ.	
82 Street Address (P.O. Box Number is Not Acceptable)	
83 901 N. Lake Destiny Drive, Suite 145	
84 City Maitland	85 Zip Code FL 32751

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 607.0504, Florida Statutes.

SIGNATURE: *Helena G. Malchow* DATE: **Jul 7, 1995**

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MARTIN, GEORGE
STREET ADDRESS	2711 N HALIFAX AVE
CITY - ST - ZIP	DAYTONA BEACH FL
TITLE	VD
NAME	GODWIN, PHILIP
STREET ADDRESS	2711 N HALIFAX AVE
CITY - ST - ZIP	DAYTONA BEACH FL
TITLE	DD
NAME	FLAHERTY, PATRICIA
STREET ADDRESS	2711 N HALIFAX AVE
CITY - ST - ZIP	DAYTONA BEACH FL
TITLE	TD
NAME	KOON, JAMES
STREET ADDRESS	2711 N HALIFAX AVE
CITY - ST - ZIP	DAYTONA BEACH FL
TITLE	SD
NAME	JOSEPHSON, SYLVIA
STREET ADDRESS	2711 N HALIFAX AVE
CITY - ST - ZIP	DAYTONA BEACH FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	KLETZ, ESTHER
13 STREET ADDRESS	2711 N HALIFAX AVE #489
14 CITY - ST - ZIP	DAYTONA BEACH FL 32118
21 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	GOODWIN, PHILIP
23 STREET ADDRESS	2711 N HALIFAX AVE #461
24 CITY - ST - ZIP	DAYTONA BEACH FL 32118
31 TITLE	DD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	FLAHERTY, PATRICIA
33 STREET ADDRESS	2711 N HALIFAX AVE #365
34 CITY - ST - ZIP	DAYTONA BEACH FL 32118
41 TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	KOON, JAMES
43 STREET ADDRESS	2711 N HALIFAX AVE #161
44 CITY - ST - ZIP	DAYTONA BEACH FL 32118
51 TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	JOSEPHSON, SYLVIA
53 STREET ADDRESS	2711 N HALIFAX AVE #192
54 CITY - ST - ZIP	DAYTONA BEACH FL 32118
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

SSS 6/26/95

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Esther B. Kletz, President* DATE: **06-05-95** SIGNATURE: *904/677-7572* SIGNATURE: *904/673-0925*