

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2006 8:00 am
Secretary of State

02-08-2006 90011 001 ****61.25



DOCUMENT # 756305

1. Entity Name

RIVERSIDE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

2711 NORTH HALIFAX AVE.
 DAYTONA BEACH FL 32118

Mailing Address

2711 NORTH HALIFAX AVE.
 DAYTONA BEACH FL 32118



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE CR2E037 (10/05)

4. FEI Number

59-2088223

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

GOODWIN, MORRIS
 150 E DUNDEE RD
 STE A&B
 DAYTONA BEACH FL 32118

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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	PD	<input checked="" type="checkbox"/> Delete
NAME	BOWEN, GLORIA	
STREET ADDRESS	2711 N HALIFAX AVE #184	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	JOSEPHSON, SYLVIA	
STREET ADDRESS	2711 N HALIFAX AVE # 192	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	GRANT, GARY	
STREET ADDRESS	2901 N HALIFAX AVE # 207	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE	SD	<input type="checkbox"/> Delete
NAME	PAYNE, VIVIAN	
STREET ADDRESS	2711 N HALIFAX AVE, # 195	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE	D	<input type="checkbox"/> Delete
NAME	SCHEELER, WILLIAM	
STREET ADDRESS	2801 N HALIFAX AVE, # 233	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBINSON, GEORGE	
STREET ADDRESS	2711 N. HALIFAX AVE # 693	
CITY-ST-ZIP	DAYTONA BEACH, FL. 32118	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHEELER, WILLIAM	
STREET ADDRESS	2801 N. HALIFAX AVE. #233	
CITY-ST-ZIP	DAYTONA BEACH, FL. 32118	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LORETINO, MARIO	
STREET ADDRESS	2711 N. HALIFAX AVE # 486	
CITY-ST-ZIP	DAYTONA BEACH, FL. 32118	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREENE, ANNE	
STREET ADDRESS	2711 N. HALIFAX AVE # 262	
CITY-ST-ZIP	DAYTONA BEACH, FL. 32118	
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 exemptions contained in Section 119, 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: *Morris Goodwin R.A.*

1/26/2006 386-788-4544