


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90332 022 ****61.25

DOCUMENT # N0000000867

1. Entity Name
 RIO CIVIC CLUB, INC.



Principal Place of Business
 1255 N.E. DIXIE HWY
 RIO, JENSEN BEACH, FL 34957

Mailing Address
 P O BOX 1001
 JENSEN BEACH, FL 34958

24047079



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

04162004 Chg-NP CR2E037 (10/03)

6. Name and Address of Current Registered Agent

PREAST, JULIE
 538 N.E. ALICE STREET
 RIO, JENSEN BEACH, FL 34957

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 re-registering)

Filing Fee is \$61.25 Due by May 1, 2004

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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE VPD NAME PREAST, JULIE STREET ADDRESS 538 NE ALICE STREET CITY-ST-ZIP RIO JENSEN BEACH, FL 34957	<input checked="" type="checkbox"/> Delete	TITLE VPD NAME DAVID PIERCE STREET ADDRESS 1150 NE DIXIE HWY CITY-ST-ZIP JENSEN BEACH, FL 34957	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D NAME BERNARDI, LOUISE STREET ADDRESS 1712 NE SEAHORSE PLACE CITY-ST-ZIP JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE DS NAME VLAHOS, BARBARA STREET ADDRESS 1117 N.E. KUBIN AVE. CITY-ST-ZIP RIO, JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE DT NAME EGGERT, NELLIE STREET ADDRESS 550 NE ALICE STREET CITY-ST-ZIP RIO JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE PD NAME FOY, VIRGINIA STREET ADDRESS 1925 NE RIVER COURT CITY-ST-ZIP JENSEN BEACH, FL 34957	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP D ESTHER NEUNER 716 1/2 NE MAUREEN COURT JENSEN BEACH, FL 34957	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: Julie Preast Date: 4-15-04 Daytime Phone #: 772-692-1163