2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Aug 21, 2006 8:00 am

DOCUMENT # N0300009376 1. Entity Name THE RIVERSIDE PROPERTY AND HOMEOWNERS' ASSOCIATION, INC.				X	-	y 01 Stat 02 036 ****70.0	
4029 OAK F	e of Business OREST DR Y, FL 32404	Mailing Address 4029 OAK FOREST DR PANAMA CITY, FL 3240	4			· -	
2. Principal Place of Business 4001 Cak Forest DR Suite, Apt. #, etc.		3. Mailing Address 401 Cak Forest Da Suite, Apt. #, etc.					
City & Stat	· ·	City & State		4. FEI Number	hg-NP	CR2E037 (4/00	Applied For
Yavan	na City, FL Country	Panama City	Country	42-161732	28	\$0.7E	Not Applicable Additional
32404	USA	32404	USA	5. Certificate of S		Fee Requ	
,	6. Name and Address of Current R		Name /) (f		Registered Agent	
NABORS, SCOTT R 456 HARRISON AVENUE			Street Address (P.O. Box Number is Not Acceptable)				
	CITY, FL 32401		304	+ Magnol	ia A	ve-	
	T*		City		**	₽ ∎ Zip C	ode
8. The above	named entity submits this statement for		rana C	the State of FI	FL Zip C	2.401 ith, and accept	
	tions of registered agent.		- <u>g</u>				,
SIGNATURE							
SIGNATORE		nd title if applicable. {NOTE:	Registered Agent signature requ	ited when reinstating)		DATE	_ _
	Signature, typed or printed name of registred agent as Filling Fee is \$61.25	9. Election Cam	paign Financing	\$5.00 May Be		Make check payabl	e to e
D	Signature, typed or printed name of registred agent as Filling Fee is \$61.25 ue by September 6, 2006	9. Election Cam Trust Fund Co	paign Financing ontribution.	\$5.00 May Be Added to Fees	Flo	Make check payabl rida Department of	State
	Signature, typed or printed name of registred agent as Filling Fee is \$61.25	9. Election Cam Trust Fund Co	paign Financing	\$5.00 May Be Added to Fees	Flo	Make check payabl	State III
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

8/16/06 (850)913-3785