

FILE NOW: FILING FEE IS \$61.25

FILED
May 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N13776 (2)

1. Corporation Name
RIVER GROVE ESTATES, INC.



Principal Place of Business 3135 RIVER GROVE CIR. FT. MYERS FL 33905	Mailing Address 3135 RIVER GROVE CIR. FT. MYERS FL 33905-6203
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3. Date Incorporated or Qualified 03/11/1986	3a. Date of Last Report 07/02/1996
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21 3124 River Grove Cir.	26 3124 River Grove Cir.
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Ft. Myers, Fl	28 Ft. Myers, Fl
24 33905	25 Lee
29 33905	30 Lee

4. FEI Number NOT APPLICABLE	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 checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HOWELL, JULIA
3100 RIVER GROVE CIRCLE
FT MYERS FL 33905**

10. Name and Address of New Registered Agent

81 Name Clough, Toni
82 Street Address (P.O. Box Number is Not Acceptable) 3124 River Grove Circle
83 City Ft. Myers, Fl 33905
84 City Ft. Myers, Fl
85 Zip Code 33905

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Joni Clough DATE 4/30/97

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	HOWELL, JULIA	
STREET ADDRESS	3135 RIVER GROVE CIR	
CITY-ST-ZIP	FT MYERS FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	GERBERICK, GINNY	
STREET ADDRESS	3125 RIVER GROVE CIR.	
CITY-ST-ZIP	FT. MYERS FL 33905	
TITLE	VO	<input checked="" type="checkbox"/> DELETE
NAME	FRAZEE, RICHARD	
STREET ADDRESS	3132 RIVER GROVE CIR.	
CITY-ST-ZIP	FT. MYERS FL 33905	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	TO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Clough, Toni	
1.3 STREET ADDRESS	3124 River Grove Circle	
1.4 CITY-ST-ZIP	Ft. Myers, Fl 33905	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	VO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Patzwahl, Bruce	
3.3 STREET ADDRESS	3100 River Grove Circle	
3.4 CITY-ST-ZIP	Ft. Myers, Fl 33905	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)