2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N23128**

1. Entity Name



FILED Apr 14, 2003 8:00 am Secretary of State

04-14-2003 90912 031 ****61.25

RIVERSID									
Principal Place of Business RIVERSIDE VILLAGE ASSOC INC 9400 US HWY 1 SEBASTIAN FL 32958 US		Mailing Address 9412 US HWY 1 SEBASTIAN FL 32958 US			1 80 8 8 10 1 8 10 10 10 10 10 10 10 10 10 10 10 10 10	1 1/10) <u> </u>	41) 41811 1841	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59-2938178			pplied For lot Applicable	
Zip	Country	Zip	Country		5. Certificate of Sta	tus Desired	\$8.75 Ac	Iditional	
	6. Name and Address of Current Re	gistered Agent			_7Name and Addr	ess of New Registere	· · · · · · · · · · · · · · · · · · ·		
			Name						
MANNING 9412 U.S	G, MELODY S S. HWY 1	Street Address			(P.O. Box Number is Not Acceptable)				
SEBASTI	AN FL 32958								
			City			F	Zip Coo	de	
	e named entity submits this statement for thations of registered agent.	e purpose of changing its re	gistered office o	r registere	ed agent, or both, in the	ne State of Florida. I ar	m familiar with	, and accept	
SIGNATURE		in to the terminal (NOTE O			1 1 1 5 5	D. T.		 }	
	Signature, typed or printed name of registered agent and t	itie ir applicable. (NOTE: H	legistered Agent signa 	iture required	when reinstating)	DATE			
	FILE NOW: FEE IS \$61.25		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 DIREC	TORS	11,			S TO OFFICERS AND I	DIRECTORS II	N 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHASE, WILLIAM J. 9400 US HWY 1 SEBASTIAN FL 32958	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	443	IDENT AINE WALLA O US HWI ASTIAN, FL	1 \	☐ Change	Addition	
TITLE NAME	MANNING, MELODY S	Delete Change	TITLE NAME	VICE	Presidentien Gilling US Huy	t ams	☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	9412 US HWY 1 SEBASTIAN FL 32958		STREET ADDRESS CITY-ST-ZIP	SE DA	ISTIAN, FI	37058	المعروضة	and the second	
TITLE NAME	VD DAVIS, HOWARD	Delete	TITLE	DENI	retary		Change	Addition	
STREET ADDRESS	9400 US 1		NAME STREET ADDRESS	9430		1 1			
CITY-ST-ZIP	SEBASTIAN FL 32958	ē	CITY-ST-ZIP	1	ASTIAN, FL				
TITLE NAME	D Hogan, Kathleen	Delete	TITLE NAME	Dire	Ctor		☐ Change	Addition	
STREET ADDRESS	9414 US 1		STREET ADDRESS	1140	66th AVEN	uE			
CITY-ST-ZIP	SEBASTIAN FL 32958		CITY-ST-ZIP	Vero	Beach, F	L 32963			
TITLE NAME		☐ Delete	TITLE NAME	Dire	Ctor Lloyd		☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		r us Hw	y 1 <u>L 32958</u>			
TITLE		☐ Delete	TITLE	Dir	ector.	<u> </u>	☐ Change	Addition	
NAME		- Delete	NAME	VAC	rellom s	-DV_		A. Madition	
STREET ADDRESS			STREET ADDRESS	954	o Frangita	ini Dr.			
CITY-ST-ZIP	l e e e e e e e e e e e e e e e e e e e		CITY-ST-ZIP						

12. I hereby certify that the information supplied with this filling 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 repeiver 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 attrichment with an address, with all other like empowered.

772-589-