

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 04, 2001 8:00 am
Secretary of State

05-04-2001 90060 028 ****61.25

DOCUMENT # N33220

1. Entity Name

RIVIERA HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

~~0400 MASSACHUSETTS AVE~~
~~SUITE B-3~~
~~NEW PORT RICHEY FL 34653~~
US

Mailing Address

~~0400 MASSACHUSETTS AVE~~
~~SUITE B-3~~
~~NEW PORT RICHEY FL 34653~~
US

2. Principal Place of Business

8056 Old C.R. 54

Suite, Apt. #, etc.

3. Mailing Address

8056 Old C.R. 54

Suite, Apt. #, etc.

City & State

New Port Richey, FL

City & State

New Port Richey, FL

4. FEI Number

59-2961492

Applied For

Not Applicable

Zip

34653

Country

US

Zip

34653

Country

US

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

POTTER, MATTHEW A CPA
5940 MAIN ST.
NEW PORT RICHEY FL 34652

7. Name and Address of New Registered Agent

Name

Kim Johnson

Street Address (P.O. Box Number is Not Acceptable)

8056 Old C.R. 54

City

New Port Richey

FL

Zip Code

34653

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.

SIGNATURE

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

(NOTE: Registered Agent signature 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
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	SD	☒ Delete
NAME	SOKOL, RONALD	
STREET ADDRESS	5902 CACHETTE DE RIVIERE CT.	
CITY-ST-ZIP	NEW PORT RICHEY FL 34655	
TITLE	TD	☒ Delete
NAME	PATTERSON, GARY	
STREET ADDRESS	6028 RIVIERA LN.	
CITY-ST-ZIP	NEW PORT RICHEY FL	
TITLE	SD	☐ Delete
NAME	GONZALEZ, PAUL	
STREET ADDRESS	5962 RIVIERA LANE	
CITY-ST-ZIP	NEW PORT RICHEY FL 34655	
TITLE	D	☐ Delete
NAME	NEWMAN, LINDA	
STREET ADDRESS	6212 CLAIRE DELUNE CT	
CITY-ST-ZIP	NEW PORT RICHEY FL 34655	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☒ Addition
NAME	Sandy Mitchell	
STREET ADDRESS	5957 Riviera Lane	
CITY-ST-ZIP	New Port Richey, FL 34655	
TITLE	VD	☒ Change ☐ Addition
NAME	Linda Neuman	
STREET ADDRESS	6212 Claire Delune Ct	
CITY-ST-ZIP	New Port Richey, FL 34655	
TITLE	TD	☒ Change ☐ Addition
NAME	Paul Gonzalez	
STREET ADDRESS	5962 Riviera Lane	
CITY-ST-ZIP	New Port Richey, FL 34655	
TITLE	SD	☐ Change ☒ Addition
NAME	Bryan Jameson	
STREET ADDRESS	6152 Claire Delune Ct	
CITY-ST-ZIP	New Port Richey, FL 34655	
TITLE	D	☐ Change ☒ Addition
NAME	Paul Tancretti	
STREET ADDRESS	5851 Cachette De Riviere Ct	
CITY-ST-ZIP	New Port Richey, FL 34655	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-26-01 (727)375-9880

CR2E037 (10/00)