FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

Secretary or State

DIVISION OF CORPORATIONS

1996

DOCUMENT # N37847

(3)

RIVER FALLS ESTATES ASSOCI. INC.

	ALLO COTATLO AGOCO.	1110.								
Principal Place of	Business	Mailing Ad	idress					1981 31811 BIBIT	CHURL DIVIL	BIE!! 318!) 1881
POST OFFICE E		POST OFFICE BOX 1611 COCOA BEACH FL 32932-1611 US								
US							 Date Incorporated or Qualified 04/23/1990 	02/02/1995		
2. Principal Place	e of Business	2a. Mailing	Address				4. FEI Number 59-3016022		1	Applied For
1		26	A . 1				39-30 10022		 +-	Not Applicable Additional
Suite, Apt. #,	etc.	27 Suite,	Apt. #, etc.				5. Certificate of Status Desired			Required
City & State		City &	State				6. Election Campaign Financing		*	May Be
]		28		T 6-			Trust Fund Contribution 8. This corporation has liability for its			d to Fees
7	Country	Zip 29		30	untry		Florida Statutes B. This corporation has liability for the statutes	ntangibie ta ∃ Yes 🗷	No	185.002,
I	9. Name and Address of Curre	1.7-1	Agent	[50]	1		10. Name and Address of New R	egistered A	gent	
	g, risino sino i				81	Name				
IRVIN, J. F	PAUL				82	Street Add	ress (P.O. Box Number is Not Acceptab	ole)		
2 RIVER FALLS DRIVE										
	EACH FL 32931				83					
					84	City		FL	85 Zi	p Code
	the provisions of Sections 617.050 d agent, or both, in the State of Flor				corpo		and of directors. Thoroby doospt the app			
or registered familiar with	The provisions of Sections of Flod d agent, or both, in the State of Flod , and accept the obligations of, Sec grature, typed or printed name of registered age	ction 617.0503, I	Florida Statute	es.	ьогрс		ed when reinstating)	DATE		
or registered familiar with SIGNATURE SI	d agent, or both, in the State of Flo , and accept the obligations of, Sec grature, typed or printed name of registered ago	ction 617.0503, I	ge was authori Florida Statute	OTE Registere	ed Agent			DATE FICERS AND	DIRECTO	
or registered familiar with SIGNATURE	d agent, or both, in the State of FIO, and accept the obligations of, Sec grouture, typed or printed name of registered ago. OFFICERS AI	origa, Such chang ction 617,0503, f	Florida Statute	OTE- Registere	ed Agent I. TITLE		ed when reinstating)	DATE FICERS AND		
or registered familiar with SIGNATURE	d agent, or both, in the State of Flo., and accept the obligations of, Sec grature, typed or printed name of registered age OFFICERS AI PD FONTES, GEORGE R.	origa, Such chang ction 617,0503, f	ge was authori Florida Statute	OTE: Registere 13 1.11	ed Agent i. TITLE NAME	t signature recivire	ed when reinstating)	DATE FICERS AND	DIRECTO	
or registered familiar with SIGNATURE 12. THILE NAME STREET ADDRESS	d agent, or both, in the State of Flo., and accept the obligations of, Sec grature, typed or printed name of registered age. OF FICERS AI PD FONTES, GEORGE R. 54 RIVER FALLS DR.	origa, Such chang ction 617,0503, f	ge was authori Florida Statute	OTE Registers 13 1.11 1.21	ed Agent I. TITLE NAME STREET	t signature require	ed when reinstating)	DATE FICERS AND	DIRECTO	
or registered familiar with SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	d agent, or both, in the state of Flo , and accept the obligations of, Sec grature, typed or printed name of regulated age OFFICERS AT PD FONTES, GEORGE R. 54 RIVER FALLS DR. COCOA BEACH FL	origa, Such chang ction 617,0503, f	ge was authori Florida Statute	OTE Registere 13 1.11 1.21 1.33	ed Agent i. TITLE NAME	L signature require ADORESS T-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change	☐ Additio
or registered familiar with SIGNATURE 112. THE NAME STREET ADDRESS CITY-ST-ZIP THE	d agent, or both, in the State of Flo., and accept the obligations of, Sec grature, typed or printed name of registered age. OF FICERS AI PD FONTES, GEORGE R. 54 RIVER FALLS DR.	origa, Such chang ction 617,0503, f	Place TE	OTE Registers 13 1,11 1,21 1,33 1,41 2,1	ed Agent I. TITLE NAME STREET CHY-S	ADDRESS	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change	☐ Additio
or registered familiar with SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	d agent, or both, in the state of Flo , and accept the obligations of, Sec grature, typed or printed name of registered age OFFICERS AT PD FONTES, GEORGE R. 54 RIVER FALLS DR. COCOA BEACH FL VD	origa, Such chang ction 617,0503, f	Place TE	OTE: Respirators 13 1.11 1.21 1.33 1.41 2.11 2.2	ed Agent L TITLE NAME STREET CITY-S TITLE	ADDRESS	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change	☐ Additio
or registered familiar with signature	d agent, or both, in the state of Flo, and accept the obligations of, Sec agrature, typed or printed name of required age. OFFICERS AI PD FONTES, GEORGE R. 54 RIVER FALLS DR. COCOA BEACH FL VD OUZTS, GARY R. 30 INDIAN VILLAGE TR COCOA BEACH FL	origa, Such chang ction 617,0503, f	PER VAS AUTOM Florida Statute IN	13 1.11 1.25 1.33 1.41 2.11 2.2 2.3 2.4	d Agent L TITLE NAME STREET CHY-S TITLE NAME STREET	ADDRESS	ed when renstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change	☐ Additio
or registered familiar with SIGNATURE 12. Itile NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	d agent, or both, in the State of Flo, and accept the obligations of, Security, typed or printed name of registered age OFFICERS AI PD FONTES, GEORGE R. 54 RIVER FALLS DR. COCOA BEACH FL VD OUZTS, GARY R. 30 INDIAN VILLAGE TR COCOA BEACH FL STD	origa, Such chang ction 617,0503, f	Place TE	OTE: Respitere 13 1.11 1.21 1.33 1.41 2.11 2.2 2.3 2.4 3.1	ed Agent I. TITLE NAME STREET NAME STREET STREET CITY-S TITLE	ADDRESS	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change	☐ Additio
or registered familiar with SIGNATURE 12. Itile NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	d agent, or both, in the State of Floi, and accept the obligations of, Section and accept the obligations of, Section and accept the obligations of, Section and Section 2015. PD FONTES, GEORGE R. 54 RIVER FALLS DR. COCOA BEACH FL VD OUZTS, GARY R. 30 INDIAN VILLAGE TR COCOA BEACH FL STD IRVIN, J. PAUL	origa, Such chang ction 617,0503, f	PER VAS AUTOM Florida Statute IN	OTE: Resistere 13 1.11 1.21 1.33 1.41 2.11 2.2 2.3 2.4 3.1 3.2	Ed Agent TITLE NAME STREET CHY-S TITLE NAME STREET CHY-S TITLE NAME	ADDRESS T-ZIP ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change	☐ Additio
or registered familiar with SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	d agent, or both, in the State of Flo, and accept the obligations of, Sector, and American Sector, and accept the obligations of Sector, and a	origa, Such chang ction 617,0503, f	PER VAS AUTOM Florida Statute IN	OTE Resisters 13 1.11 1.21 1.31 2.11 2.2 2.3 2.4 3.1 3.2 3.3	Ed Agent TITLE NAME STREET CHY-S TITLE NAME STREET CHY-S TITLE NAME	ADDRESS T-ZIP ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change	Additio
Or registered familiar with SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	d agent, or both, in the State of Floi, and accept the obligations of, Section and accept the obligations of, Section and accept the obligations of, Section and Section 2015. PD FONTES, GEORGE R. 54 RIVER FALLS DR. COCOA BEACH FL VD OUZTS, GARY R. 30 INDIAN VILLAGE TR COCOA BEACH FL STD IRVIN, J. PAUL	origa, Such chang ction 617,0503, f	PER VAS AUTOM Florida Statute IN	OTE Resisters 13 1.11 1.21 1.33 1.44 2.11 2.2 2.3 2.4 3.1 3.2 3.3 3.4	AGENTALE NAME STREET CITY-S TITLE NAME STREET NAME STREET NAME STREET	ADDRESS T-ZIP ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change	Additio
or registered familiar with SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	d agent, or both, in the State of Flo, and accept the obligations of, Sector, and American Sector, and accept the obligations of Sector, and a	origa, Such chang ction 617,0503, f	DELETE	13 1.11 1.21 1.33 1.44 1.33 1.33 1.34 4.1	ad Agent Tifle NAME STREET CITY-S TIFLE NAME STREET CITY-S TIFLE NAME STREET NAME STREET NAME CITY-S TIFLE NAME NAME STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change Change Change Change	Additio
Or registered familiar with SIGNATURE 12. TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	d agent, or both, in the State of Flo, and accept the obligations of, Sector, and American Sector, and accept the obligations of Sector, and a	origa, Such chang ction 617,0503, f	DELETE	13 1.11 1.21 1.33 1.44 2.4 3.1 3.2 3.3 3.4 4.1 4.2	Adaptive Company of the Company of t	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change Change Change Change	Additio
Or registered familiar with SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	d agent, or both, in the State of Flo, and accept the obligations of, Sector, and American Sector, and accept the obligations of Sector, and a	origa, Such chang ction 617,0503, f	DELETE	13 1.11 1.21 1.33 1.44 2.43 4.4	Adjusted to the control of the contr	ADDRESS Y-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIFFECTOR Change Change Change Change	Additio
Or registered familiar with SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	d agent, or both, in the State of Flo, and accept the obligations of, Sector, and American Sector, and accept the obligations of Sector, and a	origa, Such chang ction 617,0503, f	DELETE	224 Systems 13	TITLE NAME STREET CITY-S NAME STREET CITY-S TITLE	ADDRESS Y-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTO Change Change Change Change	Additio
Or registered familiar with SIGNATURE 12. ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	d agent, or both, in the State of Flo, and accept the obligations of, Sector, and American Sector, and accept the obligations of Sector, and a	origa, Such chang ction 617,0503, f	DELETE	224 31 1.11 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4 5.1 5.2	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE RAME CITY-S TITLE RAME STREET CITY-S TITLE NAME STREET LITLE NAME STREET LITLE NAME STREET LITLE NAME STREET LITLE RAME STREET	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP I ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIFFECTOR Change Change Change Change	Additio
Or registered familiar with SIGNATURE 12. TILLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	d agent, or both, in the State of Flo, and accept the obligations of, Sector, and American Sector, and accept the obligations of Sector, and a	origa, Such chang ction 617,0503, f	DELETE	224 By the sisters of	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE RAME CITY-S TITLE RAME STREET CITY-S TITLE NAME STREET LITLE NAME STREET LITLE NAME STREET LITLE NAME STREET LITLE RAME STREET	ADDRESS T-ZIP ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIFFECTOR Change Change Change Change	Additio
Or registered familiar with SIGNATURE 12. TILLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	d agent, or both, in the State of Flo, and accept the obligations of, Sector, and American Sector, and accept the obligations of Sector, and a	origa, Such chang ction 617,0503, f	DELETE	224 31 141 22 23 33 34 41 41 51 52 53 54	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE TITLE CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIFFECTOR Change Change Change Change	Additio
Or registered familiar with SIGNATURE 12. TILLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	d agent, or both, in the State of Flo, and accept the obligations of, Sector, and American Sector, and accept the obligations of Sector, and a	origa, Such chang ction 617,0503, f	DELETE	224 By the sisters of	TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE CITY-S CITY-	ADDRESS T-ZIP ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	Change Change Change Change Change	Additio
Or registered familiar with SIGNATURE 12. TILLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	d agent, or both, in the State of Flo, and accept the obligations of, Sector, and American Sector, and accept the obligations of Sector, and a	origa, Such chang ction 617,0503, f	DELETE	224 Systems 133 1.11 1.22 1.33 1.44 1.34 1.41 1.52 1.33 1.44 1.51 1.52 1.53 1.54 1.62 1.54 1.62 1.55 1.54 1.62 1.65 1.65 1.65 1.65 1.65 1.65 1.65 1.65	A Agentic Agen	ADDRESS T-ZIP ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	ed when reinstating: ADDITIONS/CHANGES TO OFF	DATE FICERS AND	Change Change Change Change Change	Addition Addition Addition Addition

SIGNATURE:

THE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OF DIRECTOR

11-96 407 783 \$296

CR2E037 (12/95)