


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 27, 2004 08:00 AM
Secretary of State

DOCUMENT # P0000078756

1. Entity Name
LE RIVAGE REALTY, INC.



Principal Place of Business
**7777 GLADES RD SUITE 310
 BOCA RATON FL 33434**

Mailing Address
**7777 GLADES RD SUITE 310
 BOCA RATON FL 33434**

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country



MOORE CR2E034 (11/03)

4. FEI Number **65-1043795**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCHMIER, ROBERT J
 7777 GLADES RD SUITE 310
 BOCA RATON FL 33434**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

B. 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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DS** Delete
 NAME **GREENBERG, LEONRD E**
 STREET ADDRESS **11500 EL CLAIR RANCH ROAD**
 CITY-ST-ZIP **BOYNTON BEACH FL 33437**

Change Addition
U00000133031
04/27/04-80073-002 158.75

TITLE **DP** Delete
 NAME **SCHMIER, ROBERT**
 STREET ADDRESS **7777 GLADES RD SUITE 310**
 CITY-ST-ZIP **BOCA RATON FL 33434**

Change Addition

TITLE **VPD** Delete
 NAME **FEURRING, DOUGLAS R**
 STREET ADDRESS **7777 GLADES RD SUITE 310**
 CITY-ST-ZIP **BOCA RATON FL 33434**

Change Addition

TITLE **VP** Delete
 NAME **REGISTER, ROXANNE**
 STREET ADDRESS **7777 GLADES RD, #310**
 CITY-ST-ZIP **BOCA RATON FL 33434**

Change Addition

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, 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:  **Robert J. Schmier** **4/22/04** **561-483-8400**
Signature and typed or printed name of signing officer or director Date Daytime Phone #