

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000077265

FILED
Apr 29, 2004
Secretary of State

Entity Name: RIVER PALM, INC.

Current Principal Place of Business:

2325 NE INDIAN RIVER DRIVE
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

2325 NE INDIAN RIVER DRIVE
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 65-0530206

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GART, DAVID A
SHUTTS & BOWEN
250 AUSTRALIAN AVE.S.,#500 ONE CLEARLAKE
W. PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DTPS () Delete
Name: WAKEMAN, RUFUS II
Address: 646 NE RIVER TERRACE
City-St-Zip: JENSEN BEACH, FL 34957

Title: PTS () Delete
Name: WAINWRIGHT, JONATHAN
Address: 100 MAIDEN LANE
City-St-Zip: NEW YORK, NY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUFUS WAKEMAN II

DTPS

04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date