

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90725 003 ***150.00

DOCUMENT # S27287

1. Entity Name
RIVERSIDE BANQUE PREMISES CORPORATION



Principal Place of Business
2211 OKEECHOBEE ROAD
FORT PIERCE, FL 34950-6552

Mailing Address
2211 OKEECHOBEE ROAD
FORT PIERCE, FL 34950-6552

11040066



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0266651

Applied For

Not Applicable

Zip

Country

Zip

Country

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

POLACKWICH, ALAN S. SR.
2770 INDIAN RIVER BLVD.
SUITE 501
VERO BEACH, FL 32960

Name

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

City

FL

Zip Code

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

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 \$150.00
After May 1, 2003 Fee Will be \$350.00
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 NAME PD SMITH, VERNON D. Delete
STREET ADDRESS 2211 OKEECHOBEE ROAD
CITY-ST-ZIP FORT PIERCE, FL

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME VD MCGRATH, LARRY Delete
STREET ADDRESS 1600 S. US 1
CITY-ST-ZIP FORT PIERCE, FL

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME STD BROWN, TIM E Delete
STREET ADDRESS 2211 OKEECHOBEE RD
CITY-ST-ZIP FORT PIERCE, FL

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME VD CREAMER, JAMES E Delete
STREET ADDRESS 2211 OKEECHOBEE RD
CITY-ST-ZIP FT PIERCE, FL

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Change Addition
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 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 those empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/2003

Date

772-462-5058

Daytime Phone #

CR2E034 (10/02)