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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # N47859

(6)

RIVER PARK PHASE 1 COMMITTING ASSOCIATION INC

| Principal Place | of Business | - | Mailing Add | fress | | | | | | | | |
|--|--|--|-----------------------------------|------------------------|---|---|----------------------------------|--|------------------------|------------------------------|-----------------------------|--|
| 2180 WEST S.R. 434 2180 WEST SUITE 5000 SUITE 5000 | | | | | 1 | | | | | | | |
| | | | | | | | | Date Incorporated or Qu 03/12/1992 | alified | 3a. Date | of Last)5/01/ | |
| Principal Place of Business | | 2a. Mailing Address | | | | | 4. FEI Number | | | | Applied For | |
| 21 Suite Ant | # oto | | 26 | · · | | | | <u>59-3111191</u> | | | - | Not Applicab |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 Additional | | | |
| City & State | 9 | | City & St | tate | | | | 6 Flantin 6 | | | | Required |
| 23 | | | 28 | | | | | Election Campaign Finan Trust Fund Contribution | icing | | | May Be |
| Zip | | untry | Zip | | Coun | try | | 8. This corporation has liabi | ility for in | tangible ta | under s | d to Fees |
| 4 | 25 | ddroop of Curre | 29 nt Registered Age | | 30 | | | Florida Statutes | | Yes 🔼 N | lo | 100.002, |
| | 5. Name and A | doress of Currer | nt Hegistered Age | ent | | | | 10. Name and Address of | New Re | gistered A | ent | |
| MADT | IAMES W. ID | | | | | Nam | 9 | | | | | |
| HART, JAMES W. JR C/O SENTRY MANAGEMENT, INC. | | | | | 1 | 32 Stree | : Address | ess (P.O. Box Number is Not Acceptable) | | | | |
| | est s.r. 434 st | | | | - | 33 | | | | · | | |
| | 000 FL 32779 | : 3000 | | | | 93 | | | | | | |
| LONGII | OOD FL 32779 | | | | Ē | 4 City | | | | | 85 Zig | Code |
| 11. Pursuant t | o the provisions of S | Sections 617.0502 | and 617 1508 Fig | orida Statuto | e the above | 2 22 22 24 | | on submits this statement for t | | PL | | |
| or roalakar | ed agent, or hoth in | the State of Florid | da. Such change w | vas authorize | ed by the co | rporation | s board c | in submits this statement for t if directors. I hereby accept th | the purpo ne appoir | ose of chang alment as re | jing its r aistered | egistered offic |
| familiar wit | h, and accept the of | aligations of Soct | ion 617 0500 Fire | ide Or I | , and 60 | p 0. m. 0 | | | | | | agone runi |
| tamiliar wit | h, and accept the ol | oligations of, Sect | ion 617.0503, Flori | ida Statutes. | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | ю прроп | MINOR GOTO | • | |
| familiar wit | h, and accept the o | oligations of, Sect | ian 617.0503, Flari | ida Statutes. | , | | | | | | | |
| tamiliar wit SIGNATURE | h, and accept the ol | oligations of, Sect | and title Papplicane D DIRECTORS | ida Statutes. | t Registered A | | | en reinstallingt | | DAIL | | |
| samiliar wit SIGNATURE | h, and accept the ol | oligations of, Sect anie of registered agent OFFICERS ANI | and title Papplicane D DIRECTORS | ida Statutes. | t Rogistered A | gent signature | repared wh | en reinstallingt ADDITTIONS/CHANGES TO | | DATE SERS AND D | | RS IN 12 |
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SIGNATURE: SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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