

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90309 031 ****61.25

DOCUMENT # 724153 1. Entity Name RIVER MANOR CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 7100 W COMMERCIAL BLVD. STE. 107 FORT LAUDERDALE, FL 33319 US			Mailing Address 7100 WEST COMMERCIAL BLVD SUITE 107 LAUDERHILL, FL 33319 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
RANDALL K ROGER & ASSOC. 627 NW 22ND ST STE 300 BOCA RATON, FL 33487				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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MARTORILLI, CARMINE 3004 NE 5 TERR., #207 WILTON MANORS, FL 33334 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD MOSHER, CHARLES 3004 NE 5th Terrace C101 Wilton Manors, FL 33334 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOWE, ROGER 3004 NE 5TH TERR #315 FORT LAUDERDALE, FL 33334 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARTER, SHARON 3004 NE 5 TERR., #108 WILTON MANORS, FL 33334 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LITTLE, PAT 3004 N.E. 5th Terrace # C317 Wilton Manors, FL 33334 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LOWE, JINNY 3004 NE 5TH TERR., #306 WILTON MANORS, FL 33334 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD Dee, Carmela 3004 N.E. 5th Terr. # A212 Wilton Manors, FL 33334 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD Allen, J.P. 3004 NE 5th Terr. # C183 Wilton Manors, FL 33334 ☐ 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)(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 617, 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: <u>Pat Little</u> PAT LITTLE <u>3/7/05</u> <u>954.561.126</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					