

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2001 8:00 am
Secretary of State
 02-26-2001 90541 040 ***150.00

0284789

DOCUMENT # 193534

1. Entity Name

RIVIERA TRAILER COURT INCORPORATED

Principal Place of Business

Mailing Address

~~805 PARK AVENUE~~
~~LAKE PARK FL 33403~~

~~805 PARK AVENUE~~
~~LAKE PARK FL 33403~~

2. Principal Place of Business

9228 E Highland Pines Blvd.
 Suite, Apt. #, etc.

3. Mailing Address

9228 E Highland Pines Blvd.
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Palm Beach Gardens, FL

City & State

Palm Beach Gardens, FL

4. FEI Number

59-0801804

Applied For

Not Applicable

Zip

33418

Country

Palm Beach

Zip

33418

Country

Palm Beach

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

SMITH, RICHARD M
9228 E. HIGHLANDS PINES BLVD.
PALM BCH GARDENS FL 33418

7. Name and Address of New Registered Agent

Name

Same

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.

SIGNATURE

Richard M. Smith - PRES.
Mable C Smith - Secretary

2/16/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
 NAME **SMITH, RICHARD M**
 STREET ADDRESS **9228 E HIGHLANDS PINES BLVD.**
 CITY-ST-ZIP **PALM BCH GARDENS FL 33418**

TITLE **D** ☐ Delete
 NAME **SMITH, MABLE C**
 STREET ADDRESS **9228 E. HIGHLANDS PINES BLVD.**
 CITY-ST-ZIP **PALM BCH GARDENS FL 33418**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
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 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard M. Smith **RICHARD M. SMITH PRES.** *2/26/01* *561-*
 625-3798

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)