

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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97 JUN 27 AM 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 203388

1. Corporation Name

RIVERS BUS SALES, INC.
DBA RIVERS BUS & RV SALES

Principal Place of Business

10626 GENERAL AVE.
JACKSONVILLE, FL
32220

Mailing Address

PO BOX 6009
JACKSONVILLE, FL.
32236

3. Date Incorporated or Qualified

3a. Date of Last Report

2/9/96

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-0815577

Applied For

Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

24

25

29

30

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAWRENCE H. SCHAFER
9002 CAMSHIRE DR.
JACKSONVILLE, FL. 32244

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

LAWRENCE H. SCHAFER 6/23/97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME LAWRENCE H. SCHAFER
STREET ADDRESS 9002 CAMSHIRE DR.
CITY-ST-ZIP JACKSONVILLE, FL. 32244

DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

TITLE VP
NAME WILLIAM C. LOTSHAW
STREET ADDRESS 6268 LEWARD CT.
CITY-ST-ZIP ORANGE PARK, FL. 32073

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

200002229302-9
-07/02/97-01051-007
****165.00 ****165.00

TITLE S/T
NAME ERNEST J. SEARCY
STREET ADDRESS 10728 FALL CREEK DR.
CITY-ST-ZIP JACKSONVILLE, FL. 32222

DELETE

3.1 TITLE S/T
3.2 NAME ERNEST J. SEARCY
3.3 STREET ADDRESS 10728 FALL CREEK DR.
3.4 CITY-ST-ZIP JACKSONVILLE, FL. 32222

Change Addition

TITLE
NAME CAROLYN SCHAFER
STREET ADDRESS 9002 CAMSHIRE DR.
CITY-ST-ZIP JACKSONVILLE, FL. 32244

DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LAWRENCE H. SCHAFER 6/23/97 (904)783-0313

Date

Daytime Phone #

CR2E034 (9/96)



School Buses, Church Buses, Para Transit



Motor Homes, Fifth Wheels, Travel Trailers, Tent Campers

(2)

(904) 783-0313

RIVERS BUS & RV SALES

10626 General Avenue, Jacksonville, FL 32220

Fax (904) 783-1067

JUNE 23, 1997

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DEAR MS. MORTHAM,

I AM WRITING THIS IN REFERENCE TO THE ATTACHED ANNUAL REPORT WHICH SHOULD HAVE BEEN FILED BEFORE MAY 1st. WE NEVER RECEIVED THE REPORT THIS YEAR IN THE MAIL AS WE HAVE IN THE PAST. WE USUALLY RECEIVE THE REPORT IN FEBRUARY AND ALWAYS MAKE SURE THAT IT IS FILED IMMEDIATELY. HOWEVER, AS YOU KNOW, THERE ARE SO MANY REPORTS AND LICENSES THAT MUST BE FILED EVERY YEAR THAT IT IS VERY HARD TO KEEP UP WITH THEM. OUR ANNUAL REPORT WAS EITHER LOST IN THE MAIL OR NEVER SENT OR SOMETHING.

ANYWAY, I AM ASKING FOR THE PENALTY TO BE WAIVED AND THE \$165 PAYMENT BE ACCEPTED. I HAVE NEVER HAD TTO FILE ALL THESE REPORTS MYSELF BEFORE AND HAD NO IDEA THAT THERE WAS ONE UNTIL A FEW DAYS AGO WHEN ANOTHER COMPANY BROUGHT IT TO MY ATTENTION. I AM VERY SORRY FOR THE LATENESS OF THIS REPORT AND RESPECTFULLY REQUEST THAT THE PAYMENT BE EXCEPTED DESPITE BEING LATE.

SINCERELY,

BARBARA A. LEE
BUSINESS MANAGER/RIVERS BUS SALES