SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED Sep 08 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name 244427 (1)RIVARD REALTY, INC. Principal Place of Business Mailing Address 830 NAGETRACK POAD NN - 38 W. Mirack SUITE 110 State 9 Stip PROUI -333 BACETRACK ROAD HW 38 W. MINDELLE BUTE 110 SLILE S FT WALTON BEACH FL 32548 Strip PKWY. FT WALTON BEACH FL 32548 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 02/04/1961 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Shown as shown a 59-0917158 Not Applicable Suite, Apt. #, etc. Suite, Apt.,#, etc. \$8.75 Additional 5. Certificate of Status Desired X Fritz-Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be on Beach FL Beach 23 WALTON Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year Intangible 32548 usA Yes 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHEFFER, BOBBIE R. 101 OLD FERRY RD #22-A 82 Street Address (P.O. Box Number is Not Agoptable) SHALIMAR FL 32579 В3 84 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. R. Scheffer, President or printed name of registered agent and fille it applicable SIGNATURE BORRIC ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change TITLE DELETE Addition 1.1 TITLE SCHEFF. BOBBIE.R NAME 1.2 NAME 101 OLD FERRY ROAD #22-A STREET ADDRESS 1.3 STREET ADDRESS SHALIMAR FL 32579 CITY-ST-7IP 1.4 CITY-ST-ZIP ☐ DELETE TITLE 2.1 HILE ☐ Change ■ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETÉ TITLE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 1ITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Ido 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