


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2006 8:00 am
Secretary of State

07-11-2006 90014 041 ****70.00

DOCUMENT # 707751

1. Entity Name
 LITTLE RIVER CLUB, INC.



Principal Place of Business Mailing Address

755 NE 79TH ST 755 NE 79TH ST
 MIAMI, FL 33138 MIAMI, FL 33138

DO NOT WRITE IN THIS SPACE

40050110



07012006 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1677644	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HARDISON, ROBERT R
 3750 N.E. 109 STREET #108
 NORTH MIAMI BEACH, FL 33160

*539 NE 82 TERRACE #5
 MIAMI, FL 33138*

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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 *Robert R. Hardison* ROBERT R. HARDISON 07.07.06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25
Due by September 6, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD HARDISON, ROBERT R 3750 N.E. 109 STREET #108 NORTH MIAMI BEACH, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUGG, EDWIN 8749 N.E. 8TH ST MIAMI, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOVE, LYNN NATHANIEL CREWS 1982 MARSELLER DR #1 MIAMI BEACH, FL 33141
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA, ROBERT 4100 CHASE AVE #3 MIAMI BEACH, FL 33146
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D - PD JOHNSON, ALFRED V 130 NE 192 STREET MIAMI, FL 33179
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BELL, MILTON 600 72 STREET #1 MIAMI BEACH, FL 33144

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 *Robert R. Hardison* ROBERT R. HARDISON 07.07.06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #