

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2007 08:00 AM
Secretary of State

DOCUMENT # 707751

1. Entity Name
LITTLE RIVER CLUB, INC.



Principal Place of Business

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

Mailing Address

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



01112007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1677644

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HARDISON, ROBERT R
539 N.E. 82 TERRACE #5
MIAMI, FL 33138**

**DO NOT WRITE
IN THIS SPACE**

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

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 May 1, 2007**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CAULEY, WILLIAM
1331 NE 117 TERRACE
MIAMI, FL 33161**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CREWS, NATHANIEL
1664 NE 146 ST
MIAMI, FL 33181**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ESTIVENE, BARBARA
2723 NW 60 STREET
MIAMI, FL 33142**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
JOHNSON, ALFRED V
130 NE 192 STREET
MIAMI, FL 33179**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SEARS, SCOTT
500 NE 82 TERRACE
MIAMI, FL 33138**

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04/11/07-80061-011 70.00

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert R. Hardison
Date

April 1, 2007
Daytime Phone #

305.759.6332