

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 29, 2004
Secretary of State**

DOCUMENT# 713162

Entity Name: RIVER SHORES ASSOCIATION, INC.

Current Principal Place of Business:

3000 NE 16TH AVE
4TH FLOOR
OAKLAND PARK, FL 33334

New Principal Place of Business:

Current Mailing Address:

3000 NE 16TH AVE
4TH FLOOR
OAKLAND PARK, FL 33334

New Mailing Address:

FEI Number: 59-1196377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEENAN, NANCY
3000 NE 16 AVE
OAKLAND PARK, FL 33334 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FEENAN, NANCY
Address: 3020 N.E. 16TH AVE. #E208
City-St-Zip: OAKLAND PARK, FL 33334

Title: VPD () Delete
Name: ESQUNAZI, CRAIG
Address: 3060 N.E. 16TH AVE., #H103
City-St-Zip: OAKLAND PARK, FL 33334

Title: TD () Delete
Name: SCHWARZ, ELIZABETH
Address: 1070 N.E. 34TH ST.
City-St-Zip: OAKLAND PARK, FL 33334

Title: SD () Delete
Name: SMIGALA, BILL
Address: 2990 N.E. 16TH AVE., #C205
City-St-Zip: OAKLAND PARK, FL 33334

Title: SD () Delete
Name: HARMAN, KEN
Address: 3040 N.E. 16TH AVE., #A207
City-St-Zip: OAKLAND PARK, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: COOKE, JAMES
Address: 2990 N.E. 16TH AVE. #C308
City-St-Zip: OAKLAND PARK, FL 33334

Title: TD (X) Change () Addition
Name: SCHWARZ, ELIZABETH
Address: 1900 N.E. 54TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: PERRY, DOT
Address: 2990 N.E. 16TH AVE. #C202
City-St-Zip: OAKLAND PARK, FL 33334

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH SCHWARZ

TD

04/29/2004

Electronic Signature of Signing Officer or Director

Date