

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2000 8:00 am
Secretary of State

04-14-2000 90075 042 ****61.25

DOCUMENT # 729483

1. Entity Name

RIVIERA 615 CONDOMINIUM, INC.

Principal Place of Business

Mailing Address

615 BAYSHORE DRIVE
 PENSACOLA FL 32507

615 BAYSHORE DRIVE
 PENSACOLA FL 32507-3581

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1533743

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

051159



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HIXON, JOAN P
615 BAYSHORE DRIVE
#1006
PENSACOLA FL 32507

Name **BETTY CRAMER**
 Street Address (P.O. Box Number is Not Acceptable) **615 BAYSHORE DR #903**
 City **PENSACOLA, FL** Zip Code **32507**

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.

SIGNATURE

Betty J Cramer

4/7/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WELDON, PATRICIA 615 BAYSHORE DR #1102 PENSACOLA FL 32507	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HIXON, JOAN P 615 BAYSHORE DR #1006 PENSACOLA FL 32507	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PHILLIPS, KATHLEEN T 615 BAYSHORE DR. #201 PENSACOLA FL 32507	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILSON, LORRAINE 615 BAYSHORE DRIVE #306 PENSACOLA FL 32507	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CONSTANTINE, DIMITRI G 615 BAYSHORE DR. #102 PENSACOLA FL 32507	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD. BETTY CRAMER 615 BAYSHORE DR #903 PENSACOLA, FL 32507	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MIKE WILSON 615 BAYSHORE DR #706 PENSACOLA, FL 32507	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T. RICHARD EINBECKER 615 BAYSHORE DR #902 PENSACOLA, FL 32507	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S. KATH LEONARD 615 BAYSHORE DR. #603 PENSACOLA, FL 32507	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOAN HIXON 615 BAYSHORE DR #1006 PENSACOLA, FL 32507	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. DIMITRI CONSTANTINE 615 BAYSHORE DR. #102 PENSACOLA, FL 32507	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 REQUIRED

Betty J Cramer **4/7/00**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)