

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2002 8:00 am
Secretary of State

03-04-2002 90005 007 ****61.25

DOCUMENT # 733571

1. Entity Name

RIVER RETREATS IMPROVEMENT ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**9361
 COUNTRY ROAD 649
 BUSHNELL FL 33513**

**9361
 COUNTRY ROAD 649
 BUSHNELL FL 33513**

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

27-4284104

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BECKER, FRED G
 9361 COUNTRY ROAD 649
 BUSHNELL FL 33513**

Name **LARRY LADD**

Street Address (P.O. Box Number is Not Acceptable)

7090 GR 653

City **BUSHNELL**

FL

Zip Code **33513**

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

LARRY D. LADD

Larry D. Ladd

2-16-02

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	D	<input type="checkbox"/> Delete
NAME	NAYDEN, CHARLOTTE	
STREET ADDRESS	9355 CR 447 N	
CITY-ST-ZIP	BUSHNELL FL 33513	
TITLE	P	<input type="checkbox"/> Delete
NAME	LADD, LARRY	
STREET ADDRESS	PO BOX 467	
CITY-ST-ZIP	NOBLETON FL 34661-0467	
TITLE	VP	<input type="checkbox"/> Delete
NAME	GEBEL, DUANE	
STREET ADDRESS	9481 CR 657	
CITY-ST-ZIP	BUSHNELL FL 33513	
TITLE	T	<input type="checkbox"/> Delete
NAME	BECKER, CLEO	
STREET ADDRESS	9361 CR 649	
CITY-ST-ZIP	BUSHNELL FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	GOBEL, CAROL	
STREET ADDRESS	9457 CR 657	
CITY-ST-ZIP	BUSHNELL FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	BECKER, FRED	
STREET ADDRESS	9361 COUNTRY ROAD 649	
CITY-ST-ZIP	BUSHNELL FL 33513	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I 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 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:

Larry D. Ladd

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-02

Date

352-793-

590X3063

Daytime Phone #

CR2E037 (9/01)