2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 26, 2005 8:00 am Secretary of State

| n. Entity Name RIVER RETREATS IMPROVEMENT ASSOCIATION, INC. | | | | | | | | 26-2005 | _ | 050 ****6 | 51.25 | | |
|---|---|---------------------|--|--|--|--|--|---|---|--|-------------------------------------|-------------------------------|--|
| Principal Place 7090 CR 653 BUSHNELL, F | 3 | PO BO | Address OX 167 ETON, FL 34661 | | | | | | | | | | |
| | lace of Business | 3. Maili | ng Address | | | | | | | | | | |
| 938 Suite, Apt. | | Suit | te, Apt. #, etc. | | | | 04470005 | | | | | | |
| | | | | | | | 01172005 | Chg-N | NP | CR2E0 | 37 (10/03) | | |
| BUSHNELL, FL | | City | City & State | | | | 4. FEI Number Applied For 27-4284104 Not Applicable | | | | | | |
| Zip 335/ | 3 Country | Zip | | Cou | ntry | | 5. Certificat | e of Status | Desired | | \$8.75 Add Fee Require | | |
| 77.77 | 6. Name and Address of Current | t Registere | d Agent | | | | 7. Name an | d Address | of New R | legistered | Agent | <u> </u> | |
| LADD, LAF | RRY | | | | Name | MARC | GARET | Mi | KULI | GOF | ski | | |
| 7090 CR 6 | 553 | | | | | | 7 C A | ber is Not | Acceptable | | | | |
| BUSHNEL | L, FL 33513 | | | | 7 | 7.20 | | _6 | | | | | |
| | | | | | City | 2 | INELL | | | FL | Zip Cod | -10 | |
| The above named entity submits this statement for the purpose of changing its registered | | | | | ed office or | | | oth, in the | State of Flo | | | | |
| the obligat | ions of registered agent. | | | | | | • | | | | | | |
| SIGNATURE . | SIGNATURE MARGORET M. KULIGOFSKI-TREASURER Margaret M. Kuligofski 01-22-05 | | | | | | | | | | | | |
| 0.0 | Signature, typed or printed name of registered agent | t end title if anol | forthe MOTE | Begistere | d Anent sinnetu | | when reinstating) | , | 10 | DATE | | | |
| | | | Labe. (Note | · ragaina | | 0 | | | , | | | f | |
| | Filing Fee Is \$61.25 Due by May 1, 2005 | | 9. Election Can Trust Fund C | npaign F Contributi | inancing | <u> </u> | \$5.00 May Added to Fee | s 💮 | Flor | ida Depa | k payable t | ate | |
| 10. | Filing Fee Is \$61.25 Due by May 1, 2005 OFFICERS AND DI | | 9. Election Cam Trust Fund C | npaign F Contributi | inancing ion. | <u> </u> | \$5.00 May | s 💮 | Flor | ida Depa | rtment of SI | tate | |
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| • | Filing Fee Is \$61.25 Due by May 1, 2005 OFFICERS AND DI | | 9. Election Cam Trust Fund C | npaign F Contributi 11. | inancing ion. | 516 | \$5.00 May Added to Fee DDITIONS/C | HANGES 1 | Flor O OFFICE 7 W | rida Depa RS AND D | rtment of SI | tate | |
| TITLE NAME | Filing Fee Is \$61.25 Due by May 1, 2005 OFFICERS AND DI P HODGE, GARY | | 9. Election Cam Trust Fund C | npaign F Contributi 11. TITLE NAME STREE | inancing ion. | 516 | \$5.00 May Added to Fee | HANGES 1 | Flor O OFFICE 7 W | rida Depa RS AND D | rtment of Si | tate | |
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12. I hereby certify that the information supplied with this filling 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: Margaret M. Kuligofale MARGARET M. KULIGOFSKI 01-22-05 8/3 949-6184
SKOMFURE AND TYPED OR PRINTED NAME OF SKOMSHIG OFFICER OR DIRECTOR Date Date