

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90180 035 ****61.25

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DOCUMENT # 734478



1. Entity Name
RIVER ISLES GOLF ASSOCIATION, INCORPORATED

Principal Place of Business
**1014 BAY TREE RD
BRADENTON FL 34208
US**

Mailing Address
**159 RIVER ISLES
BRADENTON FL 34208**

90006165



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1665094**

Applied For
Not Applicable

Zip Country

Zip Country

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

**JACOBSON, KENNETH J
213 RIVER ISLES
1205 OAKLEAF BLVD.
BRADENTON FL 34208**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	PINKERTON, ARTHUR	
STREET ADDRESS	1310 BOTTLEBRUSH DR.	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	JOHNSON, RALPH	
STREET ADDRESS	706 BUTTWOOD DR	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	WAGNER, DONNA	
STREET ADDRESS	1326 OAKLEAF BLVD.	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	S	<input type="checkbox"/> Delete
NAME	JACOBSON, ANN E	
STREET ADDRESS	4300 LEMONWOOD CIR	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	T	<input type="checkbox"/> Delete
NAME	JACOBSON, KENNETH J	
STREET ADDRESS	1205 OAKLEAF BLVD	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARY ANN BROOKS	
STREET ADDRESS	4309 LEMONWOOD CIR	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOMAS ABBING	
STREET ADDRESS	4100 GARD LANE	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAGNER, DONALD	
STREET ADDRESS	1205 OAKLEAF BLVD.	
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: *[Signature]* 1/17/03 746-5411

CR2E037 (10/02)