FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -3 PM 5:58

DOCUMENT # **739868** **(8)**

1. Corporation Name

RIVIERA HARBOR CONDOMINIUM ASSOCIATION, INC

Principal Place of Business	Mailing Address
C/O JANET I. BARTH 4441 NE 15TH TERRACE FT LAUDERDALE FL 33334	C/O JANET I. BARTH 4441 NE 15TH TERRACE FT LAUDERDALE FL 33334

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/09/1977
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1821254 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 c/o MARILYN A. FLANDERS	26 c/o MARILYN A. FLANDERS
Suite, Apt. #, etc. 22 8121 SW 9TH PL.	Suite, Apt. #, etc. 27 8121 SW 9TH PL.
City & State 23 N. LAUDERDALE, FL	City & State 28 N. LAUDERDALE, FL
Zip / Country 24 33068 / 25 USA	Zip / Country 29 33068 / 30 USA

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ROSENTHAL, STUART S
800 E CYPRESS CREEK RD
STE 303
FT LAUDERDALE FL 33334

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VD	11 TITLE	ST	☒ Change ☐ Addition
NAME	DEPRETORO, THOMAS	12 NAME	DEPRETORO, THOMAS	
STREET ADDRESS	810 SE 22ND AVE, #102	13 STREET ADDRESS	810 SE 22ND AVE., # 102	
CITY-ST-ZIP	POMPANO BCH FL	14 CITY-ST-ZIP	POMPANO BCH, FL 33062	
TITLE	VD	21 TITLE		☐ Change ☐ Addition
NAME	CHANDLER, HENRY	22 NAME		
STREET ADDRESS	810 SE 22ND AVE, #201	23 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BCH FL 33062	24 CITY-ST-ZIP		
TITLE	ST	31 TITLE		☒ Change ☐ Addition
NAME	BARTH, JANET I.	32 NAME		
STREET ADDRESS	4441 NE 15TH TERRACE	33 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL	34 CITY-ST-ZIP		
TITLE	PD	41 TITLE		☐ Change ☐ Addition
NAME	AMBROSE, E.J.	42 NAME		
STREET ADDRESS	810 SE 22ND AVE #205	43 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33062	44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: E. J. Ambrose 3/28/95 407-997-7777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0047438