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

## **DOCUMENT # 745618**



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

| RIVERWOOD CONDOMINIUM ASSOCIATION, INC.  |  |  |  |  |                  | 01-21-2003 90055 028 ****61.25              |                               |              |               |           |
|--|--|--|--|--|------------------|---|-------------------------------|--------------|---------------|-----------|
| Principal Place of Business 19400 NE 25TH AVE. N. MIAMI BEACH FL 33180   |  | 19400 N  | Mailing Address<br>19400 NE 25TH AVE.<br>N. MIAMI BEACH FL 33180 |  |                  |   |                               | <b></b>      |               |           |
| 2. Principa  | Place of Business  | 3. Mailir  | ng Address   |  |                  |   |                               |              |               |           |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.                                |  |  |                  | ☐ CHECK HERE IF MAKING CHANGES              |                               |              |               |           |
| City & St  | ate  | City & State                                       |  |  |                  | 4. FEI Number <b>59-1909767</b> Applied For |                               |              |               |           |
| Zip Country  |  | Zip  |  | Country                                |                  | 5. Certificate of S                         | tatus Desired                 | \$8.75 Ac    |               | e_        |
|  | 6. Name and Address of Current   | Registered   | Agent  |  |                  | -7.«Name and Add                            | ress of New Registere         | Fee Require  |               | 4         |
|  |  |  |  | Name                                   | )                |   | or register                   | u Agent.     | - <del></del> | ┪         |
| FEIN, S<br>900 SO  | Street   | Street Address (P.O. Box Number is Not Acceptable) |  |  |                  |   |                               |              |               |           |
| PLANTA   | NTION FL 33317   |  |  | ······································ |                  |   |                               | 1            |               |           |
|  |  |  |  | City                                   | -                | · · · · ·                                   | F                             | Zip Cod      | de            | 7         |
| 8. The above named entity submits this statement for the purpose of changing its require obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Ref |  |  |  |  | ature required w |   | DATE                          | ck Payable   | to            |           |
| 10.  | OFFICERS AND DIF   | PECTORS  |  | <del></del>                            |                  |   |                               |              |               | }         |
| TITLE  | SD ST ICERS AND BIE  | TECTORS  | ☐ Delete   | 11.                                    | VE               | DITIONS/CHANGE                              | S TO OFFICERS AND D           | DIRECTORS IN |               | ],        |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | BLUM, MARIA<br>19448 NE 26TH AVE #74<br>N. MIAMI BEACH FL 33180              | _  | L.J. Detele  | TITLE NAME STREET ADDRESS CITY-ST-ZIP  | DEA<br>1944      | , CATHERI,<br>4 NE 267<br>AMI BEACH,        | JE<br>:A AJE # 61<br>FL 33180 | ☐ Change     | Addition      | 00/01/200 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | VD<br>MARTYN, LYMAN<br>19216 NE 25TH AVE #292<br>N. MIAMI.BEACH FL 33180     |  | Delete   | TITLE NAME STREET ADDRESS CITY-SI-ZIP  | KENI<br>19.20    | JEOY, Jus<br>O NE 29                        |                               |              | Addition      | 7007      |
| TITLE<br>NAME<br>Street address<br>City-St-Zip   | PD<br>BERNSTIEN, MARVIN<br>19424 26TH AVE #132<br>NORTH MIAMI BEACH FL 33180 |  | ☐ Delete   | TITLE NAME STREET ADDRESS CITY-ST-ZIP  |                  |   | (-1,000 ac. 31,00             | Change       | Addition      |           |
| TITLE<br>Name<br>Street address<br>City-St-Zip   | D<br>BEVAS, WILLIAM<br>3809 SW 167 AVE<br>MIRAMAR FL 33027                   | ,  | Delete   | TITLE NAME STREET ADDRESS CITY-ST-ZIP  |                  |   |                               | ☐ Change     | ☐ Addition    |           |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | D<br>COBIN, EDWARD<br>19240 NE 25TH AVE #243<br>N. MIAMI BEACH FL 33180      | *  | ☐ Delete   | TITLE NAME STREET ADDRESS              |                  |   |                               | ☐ Change     | Addition      |           |

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

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

SCOTT, HOWARD

19212 NE 25TH AVE #283

N MIAM! BEACH FL 33180

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

1-14.03

305 932-4336

☐ Change

☐ Addition