

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -7 AM 10:47

DOCUMENT # **750955** (7)

1. Corporation Name

RIVERVIEW CONDOMINIUM ASSOCIATION OF VERO BEACH, INC.

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

2333 INDIAN RIVER BLVD. #604
VERO BEACH FL 32960
US

2333 INDIAN RIVER BLVD. #604
VERO BEACH FL 32960
US

3. Date Incorporated or Qualified **02/06/1980** 3a. Date of Last Report **04/13/1994**

4. FBI Number **59-2008093** Applied For Not Applicable

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

2. Principal Place of Business
21 Same as above

2a. Mailing Address

Suite, Apt. #, etc.
22 add #604

26 Suite, Apt. #, etc.
27 add #604

23 City & State

28 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAVIS, BRYAN B
2333 INDIAN RIVER BLVD.
#202
VERO BEACH FL 32960

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **SD**
NAME ~~WELGERMAN, OTTO~~
STREET ADDRESS ~~2333 INDIAN RIVER BLVD., #206~~
CITY-ST-ZIP ~~VERO BEACH FL~~

11 TITLE Change Addition
12 NAME **SD Norbert Stenge**
13 STREET ADDRESS **2333 Indian River Blvd., #204**
14 CITY-ST-ZIP **Vero Beach, Fl. 32960**

TITLE **PD**
NAME ~~PATANE, CLAUDIO~~
STREET ADDRESS ~~2333 INDIAN RIVER BLVD., 201~~
CITY-ST-ZIP ~~VERO BEACH FL~~

21 TITLE Change Addition
22 NAME **PD Lacey Allaire**
23 STREET ADDRESS **2333 Indian River Blvd #508**
24 CITY-ST-ZIP **Vero Beach, Fl. 32960**

TITLE **TD**
NAME **DAVIS, BRYAN B**
STREET ADDRESS **2333 INDIAN RIVER BLVD., #202**
CITY-ST-ZIP **VERO BEACH FL**

31 TITLE Change Addition
32 NAME **Same**
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
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 110.07(3)(k), 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: *Bryan B Davis*
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR

4/9/95 407-562-0938
DATE AND TELEPHONE NUMBER