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Jan 21 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 755587 (3)

1. Corporation Name
RIVERMIST CONDOMINIUM, INC.



Principal Place of Business Mailing Address
5640 UNIT 2300 FERGUSON COURT NEW PORT RICHEY FL 34652
5640 UNIT 2300 FERGUSON COURT NEW PORT RICHEY FL 34652

3. Date Incorporated or Qualified 12/18/1980
3a. Date of Last Report 03/07/1996

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

4. FEI Number 59-2351873 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NOA, GERDI
5640 FERGUSON CT.
SUITE 2107
NEW PORT RICHEY FL 34652

81 Name SPANIER, RONALD
82 Street Address (P.O. Box Number is Not Acceptable) 5677 FERGUSON CT
83 SUITE 2107
84 City NEW PORT RICHEY FL 85 Zip Code 34652

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Ronald C. Spanier RONALD C. SPANIER 1-8-97
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD NOA, GERDI
NAME NOA, GERDI
STREET ADDRESS 5640 FERGUSON COURT #2107
CITY-ST-ZIP NEW PORT RICHEY FL 34652

1.1 TITLE PD SPANIER, RONALD
1.2 NAME SPANIER, RONALD
1.3 STREET ADDRESS 5677 FERGUSON CT #1205
1.4 CITY-ST-ZIP NEW PORT RICHEY FL 34652

TITLE VPD GIORGIO, JOE
NAME GIORGIO, JOE
STREET ADDRESS 5627 FERGUSON COURT #1305
CITY-ST-ZIP NEW PORT RICHEY FL 34652

2.1 TITLE VPD MURRAY, WILLIAM
2.2 NAME MURRAY, WILLIAM
2.3 STREET ADDRESS 5677 FERGUSON CT #1102
2.4 CITY-ST-ZIP NEW PORT RICHEY, FL 34652

TITLE TD SMERECKI, LARRY
NAME SMERECKI, LARRY
STREET ADDRESS 5627 FERGUSON COURT #1201
CITY-ST-ZIP NEW PORT RICHEY FL 34652

3.1 TITLE TD MACH, PHYLLIS
3.2 NAME MACH, PHYLLIS
3.3 STREET ADDRESS 5677 FERGUSON CT #1203
3.4 CITY-ST-ZIP NEW PORT RICHEY, FL 34652

TITLE SD ALLEN, BOB
NAME ALLEN, BOB
STREET ADDRESS 5640 FERGUSON COURT #2310
CITY-ST-ZIP NEW PORT RICHEY FL 34652

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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: Ronald C. Spanier RONALD C. SPANIER 1-8-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE # 0079830

CR2E037 (9/96)