2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 17, 2001 8:00 am Secretary of State DOCUMENT # 755587 1. Entity Name 05-17-2001 90385 039 ****61.25 RIVERMIST CONDOMINIUM, INC. Principal Place of Business Mailing Address 5640 UNIT 2300 5640 LINIT 2300 FERGUSON COURT FERGUSON COURT NEW PORT RICHEY FL 34652 **NEW PORT RICHEY FL 34652** 2. Principal Place of Business 3. Mailing Address <u>9AME AS ABOYĒ</u> SAME 17BCUC Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2351873 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DIALIDSON Street Address (P.O. Box Number is Not Accept SLACO TERQUISM SPANIER, RONALD 5627 FERGUSON CT #1205 **NEW PORT RICHEY FL 34652** named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida SIGNATURE printed name of registered agent and title if FILE NOW: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PD PD ■ Addition TITLE TITLE Delete SPANIER, RONALD NAME DAUIDSON, ROGER 5640 FERGUSON CT NAME # 2307 STREET ADDRESS STREET ADDRESS 5627 FERGUSON CT #1205 CITY-ST-ZIP NEW PORT RICHEY FL CITY-ST-ZIP 34652 **NEW PORT RICHEY FL 34682** ☐ Addition Change TITLE Delete Oelete TITLE LOHISER Robert 5640 Ferguson CT GIORGIO, JOE NAME NAME *****2206 5627 FERGUSON CT., #1305 STREET ADDRESS STREET ADDRESS new Port Richey, th CITY-ST-ZIP 34652 CITY-ST-ZIP **NEW PORT RICHEY FL 34652** ☐ Addition Change Change TITLE Delete TITLE SABLE, SHERYL R. MACH, PHYLLIS NAME NAME SUHO FERGUSON et #2103 STREET ADDRESS STREET ADDRESS 5627 FERGUSON CT #1203 new port Richey, FI CITY-ST-ZIP 34652 CITY-ST-ZIP **NEW PORT RICHEY FL** 50 SD ☐ Addition **⊠** Delete TITLE BANKS EUZABETH SUHO TERGUSON CH DONLON ANN NAME STREET ADDRESS 5640 FERGUSON COURT, #2209 STREET ADDRESS new Port Richey CITY-ST-ZIP CITY-ST-ZIP 34652 **NEW PORT RICHEY FL 34652** Change ☐ Addition TITLE **№** Delete TITLE SPANIER, PAULA BANKS, DAN NAME NAME 5627 Ferguson Ct 5640 FERGUSON CT #2301 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW PORT RICHEY FL 34652** new Port Richey, FI TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

^{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.