

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 760197 (4)
1. Corporation Name
RIVER OAKS CONDOMINIUM III ASSOCIATION, INC.



Principal Place of Business C/O UNIVERSITY PROPERTIES, INC. 824 E. FLETCHER AVE. TAMPA FL 33612	Mailing Address C/O UNIVERSITY PROPERTIES, INC. 824 E. FLETCHER AVE. TAMPA FL 33612
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3. Date Incorporated or Qualified 09/28/1981	
4. FEI Number 59-2182233	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 7001 Temple Terrace Hwy. Suite, Apt. #, etc. 22 City & State 23 Temple Terrace, Fl. Zip 24 33637	2a. Mailing Address 26 7001 Temple Terrace Hwy. Suite, Apt. #, etc. 27 City & State 28 Temple Terrace, Fl. Zip 29 33637
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent LERNER, PATRICIA L 606 MADISON STE. 2001 TAMPA FL 33602	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	SHIELDS, HUGH
STREET ADDRESS	1632 SEABREEZE DR.
CITY-ST-ZIP	TARPON SPRINGS FL
TITLE	VPD <input type="checkbox"/> DELETE
NAME	YOUNG, LAWRENCE
STREET ADDRESS	1632 SEABREEZE DR.
CITY-ST-ZIP	TARPON SPRINGS FL
TITLE	STD <input type="checkbox"/> DELETE
NAME	YOUNG, DEBRA
STREET ADDRESS	1632 SEABREEZE DR.
CITY-ST-ZIP	TARPON SPRINGS FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 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 _____ 1/2/98 8:13:480-1000

CR2E037 (10/97)