

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F92000000061

FILED
Jun 10, 2003
Secretary of State

Entity Name: RIVIERA HOUSING CORP.

Current Principal Place of Business:

ONE BOSTON PLACE
2100
BOSTON, MA 02108 US

New Principal Place of Business:

Current Mailing Address:

ONE BOSTON PLACE
2100
BOSTON, MA 02108 US

New Mailing Address:

FEI Number: 04-3169887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COLLINS, CHRISTOPHER W
Address: 72 HARBOR ST.
City-St-Zip: MANCHESTER, MA

Title: C () Delete
Name: COLLINS, CHRISTOPHER W
Address: 72 HARBOR ST.
City-St-Zip: MANCHESTER, MA

Title: T (X) Delete
Name: NICKAS, ANTHONY A
Address: 20 OLD PLATTERS RD
City-St-Zip: BEVERLY, MA

Title: V (X) Delete
Name: GOLDSTEIN, JEFF N
Address: 421 MARLBOROUGH ST.
City-St-Zip: BOSTON, MA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CT (X) Change () Addition
Name: COLLINS, CHRISTOPHER W
Address: 72 HARBOR ST.
City-St-Zip: MANCHESTER, MA

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER W COLLINS

P

06/10/2003

Electronic Signature of Signing Officer or Director

Date