2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 20, 2006 08:00 AM Secretary of State

	AMMOAL	ILI VILI	,	1	Sagra	tary of Stata
1. Entity Nam			Secretary of State			
RIVER G	LEN REIT, INC.					
Principal Plac	e of Business	Mailing Address	•	1		
7355 SW NII	NTH STREET 1, FL 32968	7355 SW NINTH STREET VERO BEACH, FL 32968				
	OO NOT WRITE	IN THIS SDA		01132005	No Chg-P	CR2E034 (11/05)
L	O NOT WRITE	IIA TUIO OLV	VE	4. FEI Number 65-076		Applied For Not Applicat
						\$8.75 Additional
				5. Certificate	of Status Desired	Fee Required
	6. Name and Address of Current Re	gistered Agent				7
GORDON, WILLIAM J				DO	NOT W	(DITE
7355 SW NINTH STREET					NOT W	•
VERO BE	VERO BEACH, FL 32968			IN	THIS SE	PACE
						,
• The shows	and and a state of the state of					
	e named entity submits this statement for the name of registered agent.	e britose oi cusudiud ite tedierei	en onice or registe	rea agent, or bo	in, in the State of Fi	onda. 1 am Iamiliar Wilh, and accel
SIGNATURE.						
SIGNATORE.	Signature, typed or printed name of registered agent and	tile il applicable. (NOTE: Registeri	ed Agent signature require:	d when reinstating)		DATE
Fil After M	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	- 1` T	9. Election Campaign Financing Trust Fund Contribution. \$5.00 M Added to F			10
16.	OFFICERS AND DI	RECTORS		····	<u> </u>	
TITLE	PS					
NAME STREET ADDRESS	GORDON, WILLIAM J 7355 SW NINTH STREET					
CITY-ST-ZIP	VERO BEACH, FL 32968				unnoo	
TITLE			1			0 4404 14 -80040-0 0 5 158 .75
NAME					1,11,11 (4,111,111)	BBB48.800 100.10
STREET AUDRESS						
TITLE						
NAME			1			
STREET ADDRESS				no	NOT W	/RITE
CITY-ST-ZIP			4			
NAME				IN.	THIS SI	PACE
STREET ADDRESS					•	
CITY-ST-ZIP						
SITLE					• • • • •	•
Name Street address						

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 cath; 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 in Block 10 or Block 11 if changed, or on an attachment with an addition with all pilet like empowered.

SIGNATURE:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/06

772/770-000