## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



#1304-1 FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

G15089

Co portation	140110						
RIVER	/IEW PROFESSIONAL CEN	ITER, INC.					
Principal Place	of Business	Mailing Address					J
C/O DAVID S. BAND. ESO. 240 S. PINEAPPLE AVE 10TH FLR SARASOTA FL 34236		C/O DAVID S. BAND. ESO. 240 S. PINEAPPLE AVE 10TH FLR SARASOTA FL 34236					
on a contract of the contract	E STEES	ONIMOOTA TE GREGO			<ol> <li>Date Incorporated or Qualified</li> <li>12/23/1982</li> </ol>	1 '	ate of Last Report <b>04/06/1995</b>
2. Principal Pla	nce of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-2254222		Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing		\$5.00 May Be
23		28			Trust Fund Contribution		Added to Fees
Zip	Country	Zip	Country	/	8. This corporation has liability for		tax under s. 199.032,
24	[25]		30			es <b>K</b> ]No	
	9. Name and Address of Currer	nt Hegistered Agent		1 77-1-5	10. Name and Address of New	Registere	d Agent
	4 F1400		81				
HANAN, LEWIS			82	Street Addr	ess (P.O. Box Number is Not Accept	able)	12 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1830 S. TUTTLE AVENUE Sarasota fl 34239							
UNITAGE	71A 1 C 04209		<u> </u>				
			84	City		F	85 Zip Code
11. Pursuant t or register familiar wit SIGNATURE	o the provisions of Sections 607.0502 ed agent, or both, in the State of Flori th, and accept the obligations of, Sect	2 and 607.1508, Florida Statutes, ida. Such change was authorized tion 607.0505, Florida Statutes.	the above- by the corp	named corpor poration's boar	ration submits this statement for the p rd of directors. I hereby accept the ap	surpose of compointment :	shanging its registered office as registered agent. I am
SIGNATURE _	Signature, typical or printed that no of registered agent		Rugisternd Age	nt sgnature require	d when reinstahrigt	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO O	FICERS AN	
TOLE	PD	[]] DELETE	1 1 1111,				Change Addition
NAME	HANAN, LEWIS		1.2 NAME				
STREET ADDRESS	1830 S. TUTTLE AVENUE		l.	LADORESS			
CITY - S1 - ZIP	SARASOTA FL	["] DECETE	1.4 CHY-	ST-ZIP			Fil Change Fil Addison
TITLE	SD PAND DAVID C	F"3 percie	2 11111.6				Change Addition
NAME BIDGEL ADDRESS	BAND, DAVID S.   240 S PINEAPPLE AVE 10TH	1	22 NAME				
STREET ADDRESS	SARASOTA FL	1		1 ADDRESS			
CITY+ST+ZIP TITLE	D D	[]] DECETE	24 CHTY - 3 1 THUE	S1-ZIP			Change Addition
NAME	ABEL, HARVEY J.	Е ј весете	1				Charge CT Mandou
	240 S PINEAPPLE AVE 10TH	4	3 2 NAME	1.45000.00			
STREET ADDRESS	SARASOTA FL	1		1 ADDRESS			
CITY-ST-ZIP TITLE	SANASOIA FL	[ ] DELFTE	3.4 CITY - 4. 1 TITLE	SI-ZIP			Change Addition
NAME		£,J MH H	4. 1 HILE 4.2 NAME				FT cusings FT Manifold
			Į.	LADODECC			
STREET ADDRESS			li .	LADDRESS			
CITY-ST-ZIP TITLE	·····	[_] DELETE	4.4 CITY - 5 1 TITLE	81-20°			Change Addition
NAME		L'I bette	5 2 NAME	+			FT available FT veducin
STREET ADDRESS			53SIMEE	I ADDRESS			

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 outrusted unipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 is changed, or one attackment an adjusts.

**6.2 NAME** 

THLE NAME

STREET ADDRESS

CHY-ST-ZIP

Dire

DELETE

David S. Band Director

**6 3 STREET ADDRESS** 6.4 CHY-S1-ZIP

1/29/96

Date

941/366-6660

Daytime Phone #

Change Addition

CR2E034 (12/95)