

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

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Monrath  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # **J48748** (4)  
1. Corporation Name  
**RIVINGTON CORPORATION**

95 FEB -7 PM 3: 35

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address  
201 E. PINE ST 201 E. PINE ST  
SUITE 500 ATT: JOHN SIMPSON. SUITE 500 ATT: JOHN SIMPSON.  
ORLANDO FL 32801 ORLANDO FL 32801

3. Date Incorporated or Qualified **12/24/1986** 3a. Date of Last Report **01/28/1994**  
4. FEI Number **59-2777269** Applied For  Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.  
22. City & State 27. City & State  
23. Zip 28. Zip  
24. Country 25. Country 29. Country 30. Country

9. Name and Address of Current Registered Agent  
**BOROUGHES, GRIMM & BENNET P**  
**201 E. PINE STREET SUITE #500**  
**ATTN: JOHN R. SIMPSON, JR**  
**ORLANDO FL 32801**

10. Name and Address of New Registered Agent  
81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City **FL** 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when translating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
TITLE **DP**  
NAME **SLATER, ERIC G.W.**  
STREET ADDRESS **BUCKHURST HILL**  
CITY - ST - ZIP **ESSEX ENGLAND**  
TITLE **DTS**  
NAME **SLATER, ANNE J.**  
STREET ADDRESS **BUCKHURST HILL**  
CITY - ST - ZIP **ESSEX ENGLAND**

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed; or on my appointment with an address.

SIGNATURE: *Eric G.W. Slater* **Eric G.W. Slater** President. **1-16-95**  
DATE: \_\_\_\_\_