#### -2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

### **DOCUMENT # L02000022197**

1. Entity Name RIVERSIDE BUILDERS, LLC



FILED Apr 19, 2004 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

1290 HIGHWAY A1A, SUITE 205 SATELLITE BEACH, FL 32937 1290 HIGHWAY A1A, SUITE 205 SATELLITE BEACH, FL 32937



#### DO NOT WRITE IN THIS SPACE

01152004No Chg-LLC CR2E083 (10/03)

4. FEI Number 06-1646780 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if epplicable

COLEMAN, CHRISTOPHER J ESQUIRE 1329 BEDFORD DRIVE, SUITE 1 MELBOURNE, FL 32940

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	I. 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. I a the obligations of registered agent.	m familiar with, and acc	ept
SI	SIGNATURE		

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2004

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are ny may il area.		
g.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROBERT "CHRIS" PERRY 290 ALLAN LANE MELBOURNE BEACH, FL 32951	
TITLE NAME STREET ADDRESS CRY-ST-ZIP	MGRM ROBERT STEPHEN GRAY 154 CRESCENT BAY DRIVE COCOA BEACH, FL 32931	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
HILE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
IIILE		

# DO NOT WRITE IN THIS SPACE

11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this peped as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CRY-ST-IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/16/04

321-777-6663

Daytime Phone #