

FILED
Jun 04, 2008 8:00 am
Secretary of State

05-08-2008 90103 023 ***138.75

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L06000080315		
1. Entity Name RIVERVIEW INVESTMENT GROUP, L.L.C.		
Principal Place of Business 722 SAILFISH DRIVE BRANDON, FL 33511	Mailing Address P.O. BOX 1001 BRANDON, FL 33509	30008715
DO NOT WRITE IN THIS SPACE		02122008No Chg-LLC CR2E083 (12/07)
		4. FEI Number 32-0179242 Applied For Not Applicable
DO NOT WRITE IN THIS SPACE		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent BARBER, GEORGE W 545 SANCTUARY DRIVE UNIT A-702 LONGBOAT KEY, FL 34228		DO NOT WRITE IN THIS SPACE
8. 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 am familiar with, and accept the obligations of registered agent. SIGNATURE <u>George W Barber</u> DATE <u>3-10-08</u> Signature, Name and Address of registered agent and entity, if applicable. (NOTE: Registered Agent signature required when reinstating)		
FILE NOWRU FEE IS \$138.75 After May 1, 2008 Fee will be \$338.75		
8. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BELES, FLORIAN L P.O. BOX 1001 BRANDON, FL 33509	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BRACKIN, E. L JR. P.O. BOX 281611 TAMPA, FL 33687	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CARDER, ANN L 1802 WOODNAR DRIVE SUN CITY CENTER, FL 33573	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 report as required by Chapter 508, Florida Statutes. SIGNATURE: <u>Florian L Beles</u> DATE <u>5-25-08</u> SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		