

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000008100

Entity Name: RIVERCARD, LLC

FILED
Feb 10, 2009
Secretary of State

Current Principal Place of Business:

7722 STATE ROAD 544 EAST
WINTER HAVEN, FL 33845

New Principal Place of Business:

7722 STATE ROAD 544 EAST
SUITE 215
WINTER HAVEN, FL 33881

Current Mailing Address:

7722 STATE ROAD 544 EAST STE 215
WINTER HAVEN, FL 33845

New Mailing Address:

7722 STATE ROAD 544 EAST STE 215
WINTER HAVEN, FL 33881

FEI Number: 87-0794440

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, BRUCE A
7722 STATE ROAD 544 EAST STE 215
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DAVIS, BRUCE
Address: 7722 STATE ROAD 544 EAST
City-St-Zip: WINTER HAVEN, FL 33845

Title: MGRM () Delete
Name: RICHARDSON, RALPH
Address: 7722 STATE ROAD 544 EAST
City-St-Zip: WINTER HAVEN, FL 33845

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DAVIS, BRUCE
Address: 7722 STATE ROAD 544 EAST
City-St-Zip: WINTER HAVEN, FL 33881

Title: MGRM (X) Change () Addition
Name: RICHARDSON, RALPH
Address: 7722 STATE ROAD 544 EAST
City-St-Zip: WINTER HAVEN, FL 33881

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 608, Florida Statutes.

SIGNATURE: BRUCE A. DAVIS

MGRM

02/10/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date