

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **L91214**

(1)

1. Corporation Name:

RIVERWOOD REALTY, INC.

95 MAY -1 AM 8:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

12800 UNIVERSITY DR.
SUITE 350
FT. MYERS FL 33907-5333

12800 UNIVERSITY DR.
SUITE 350
FT. MYERS FL 33907-5333

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/06/1990

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0342644

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 § 199.042,
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

28

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARINER GROUP, INC.
12800 UNIVERSITY DRIVE SUITE 350
FT. MYERS FL 33907

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 (b)(3) and 607 (b)(8), 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 hereby sworn and accept the obligations of Section 607 (b)(8), Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Director)

(Signature of Registered Agent or Director)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: P
NAME: HURBAINS, ROBERT C.
STREET ADDRESS: 12800 UNIVERSITY DR. #350
CITY, ST, ZIP: FT MYERS FL

TITLE: V
NAME: BROWN, BRYAN P.
STREET ADDRESS: 12800 UNIVERSITY DR. #350
CITY, ST, ZIP: FT MYERS FL

TITLE: ST
NAME: BLACKETER, JOE K.
STREET ADDRESS: 5749 SANDPIPER PL
CITY, ST, ZIP: FT. MYERS FL

TITLE: D
NAME: TAYLOR, ROBERT M.
STREET ADDRESS: 12800 UNIV DR. #350
CITY, ST, ZIP: FT. MYERS FL

TITLE: D
NAME: CLAYTON, STEPHEN A.
STREET ADDRESS: 12800 UNIV DR. #350
CITY, ST, ZIP: FT. MYERS FL

TITLE: D
NAME: PAVELKA, RAYMOND A.
STREET ADDRESS: 12800 UNIV DR. #350
CITY, ST, ZIP: FT. MYERS FL

1. TITLE: ☐ Change ☐ Addition

2. NAME: ☐ Change ☐ Addition

3. STREET ADDRESS: ☐ Change ☐ Addition

4. CITY, ST, ZIP: ☐ Change ☐ Addition

5. TITLE: ☐ Change ☐ Addition

6. NAME: ☐ Change ☐ Addition

7. STREET ADDRESS: ☐ Change ☐ Addition

8. CITY, ST, ZIP: ☐ Change ☐ Addition

9. TITLE: ☐ Change ☐ Addition

10. NAME: ☐ Change ☐ Addition

11. STREET ADDRESS: ☐ Change ☐ Addition

12. CITY, ST, ZIP: ☐ Change ☐ Addition

13. TITLE: ☐ Change ☐ Addition

14. NAME: ☐ Change ☐ Addition

15. STREET ADDRESS: ☐ Change ☐ Addition

16. CITY, ST, ZIP: ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions stated in Section 119 (2)(4)(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. But 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, as required, on an attachment with an address.

SIGNATURE:

Joe K. Blacketer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Joe K. Blacketer

4/24/95
Date

813-481-2011
Telephone #