FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M57291

(0)

RIVERWALK OF TARPON SPRINGS, INC.

FILED Jan 16 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address				E SERIGOR FOI DINH TODIO EIDIA TODIO EEDIA DEBLE ETODI DIDH DIDH DEDIL DEDIL DEDIL			
% RICHARD ZINN 9350 S DIXIE HWY #1530 MIAMI FL 33156		% RICHARD ZINN 9350 S DIXIE HWY #1530 MIAMI FL 33156-2945							
						3. Date Incorporated or Qualified 08/13/1987		e of Last R 7/1996	leport
r,	face of Business	2a. Mailing Address	3			4. FEI Number		+	oplied For
21		26				65-0010539			ot Applicable
Suite, Apt	#, 620	Suite, Apt. #, etc	ù.			5. Certificate of Status Desired			Additional equired
City & Stat	ė	City & State				6. Election Campaign Financing			
23		28				Trust Fund Contribution			May Be to Fees
Zip Country		Zip Country			·	B. This corporation has liability for it			
24	25	29	30			Florida Statutes	Yes [No	. 100,002,
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	gistered A	gent	
ZINI	n, richard			81	Name		•		
	0 S DIXIE HWY #1530			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
MIA	MI FL 33156								
				83					
				84	City			85 Zip	Code
				"	0	•	FL	03 Z.p.	0000
 office or r 	registered agent, or both, in the State on familiar with, and accept the obligations of t	of Florida. Such change ations of, Sect-ori 607.050	was authoriza 05, Florida Sta	ed by atute:	y the corpora s	poration submits this statement for the p tion's board of directors. I hereby accep	t the appo	intment as	registered
12.	OF ICERS AND	·····	(NOTE Hegister		ent signature requ	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE EDS AND	NIDECTAE	2C IAI 20
TITLE	PD	DELEI		TITLE		ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	ZINN, RICHARD			NAME		•	•	onlings	L vocation
STREET ADDRESS	9350 S DIXIE HWY #1530				ADDRESS				
CHY-S*-ZIP	MIAMI FL			CHTY - S					
TITLE	0	DELEI		TITLE) 1 - Z.II			Change	Addition
NAME	ZINN, SUSAN		2.2	NAME			_	_	
STREET ADDRESS	9350 S DIXIE HWY #1530				ADDRESS				
CITY-ST-ZIP	MIAMI FL			2. 4 CITY - ST - ZIP					
TITLE		DELET		TITLE				Change	Addition
NAME			3.2	NAME				_	
STREET ADORESS			3.3	STREET	ADDRESS				
CITY-ST-ZIP			3.4	CITY-	ST-ZIP				
TIFLE		DELET	E 4.1	TITLE				Change	Addition
NAME			4. 2	NAME					
STREET ADORESS			4.3	STREET	ADDRESS				
CITY - ST - ZIP				CITY-S	ST - ZIP				
7HLÉ		DELET	E 5.1	TITLE				Change	Addition
NAME			5.2	NAME					
STREET ADDRESS			5.3	STREET	ADDRESS				
CITY-ST-ZIF				CITY - S	ST - Z IP				·
TITLE		DELET	t 61	THLE			l	Change	Addition
NAME			62	NAME					
STREET ACCINESS		,	6.3	STREET	ADDRESS				
CITY- ST 2IP			64	CITY-S	SI - ZIP		************************		

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental argual 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 conformation or the preview 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 yanged, or of the transmit with an address

RICHARD ZINN

(305)670-6940