

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005669

FILED
Apr 06, 2006
Secretary of State

Entity Name: RIVERSIDE CENTER, INC.

Current Principal Place of Business:

8660 DANIELS PARKWAY
FORT MYERS, FL 33912 US

New Principal Place of Business:

Current Mailing Address:

8660 DANIELS PARKWAY
FORT MYERS, FL 33912 US

New Mailing Address:

FEI Number: 65-1081097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIES, CHRISTOPHER N ESQ
12601 WORLD PLAZA LANE, SUITE 2
FT MYERS, FL 33907 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BASIK, JEFF
Address: 7870 EAGLES FLIGHT LANE
City-St-Zip: FORT MYERS, FL 33912

Title: STD () Delete
Name: COWAN, DENNIS
Address: 17693 SUMMERLIN ROAD
City-St-Zip: FORT MYERS, FL 33908

Title: VD () Delete
Name: JACOBS, RICHARD
Address: 8876 FALLON POINT LOOP
City-St-Zip: FT MYERS, FL 33912

Title: VD () Delete
Name: SHERMAN, MICHAEL
Address: 15730 PIPERS GLEN
City-St-Zip: FORT MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: CHAMBRE, DENISE
Address: 804 CAPE VIEW DRIVE
City-St-Zip: FORT MYERS, FL 33919

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD JACOBS

VD

04/06/2006

Electronic Signature of Signing Officer or Director

Date