


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # N01000003403 1. Entity Name RIVIERA VILLAGE ASSOCIATION, INC.	
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Principal Place of Business 3934 S. PENINSULA DR. WILBUR BY THE SEA, FL 32127	Mailing Address 3934 S. PENINSULA DR. WILBUR BY THE SEA, FL 32127
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04302004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

GEDDA, RONALD
3934 S. PENINSULA DR.
WILBUR BY THE SEA, FL 32127

**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 Ron Gedda DATE 4/30/04

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

U00000157254
05/06/04 00010 020 01.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GEDDA, RONALD 3934 S. PENINSULA DR. WILBUR BY THE SEA, FL 32127
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MILLER, PATSY 3934 S. PENINSULA DR. WILBUR BY THE SEA, FL 32127
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HILL, ED 30 INLET HARBOR RD., #503 PONCE INLET, FL 32127
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ron Gedda DATE 4/30/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR