

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02453

1. Entity Name

RIVERSIDE VILLAGE MOBILE HOMEOWNERS, INC.

Principal Place of Business

2505 NE INDIAN RIVER DRIVE
LOT 216
JENSEN BEACH FL 34957

Mailing Address

% JANE L. CORNETT
401 E. OSCEOLA ST., SUITE 102
STUART FL 34994-2503

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2491670

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C/O JANE CORNETT

~~WACKEN, CORNETT & GOODE, P.A.~~

401 EAST OSCEOLA STREET, SUITE 102
STUART 34995

Name

Street Address (P.O. Box Number is Not Acceptable)

CORNETT, GOODE, ROSS & EARLE, P.A.

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VP
NAME SCHULTZ, BONNIE
STREET ADDRESS 2505 NE INDIAN RIVER DRIVE LOT 46
CITY-ST-ZIP JENSEN BEACH FL 34957

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE S
NAME CAMPBELL, DEBBIE
STREET ADDRESS 2505 NE INDIAN RIVER DRIVE LOT 317
CITY-ST-ZIP JENSEN BEACH FL 34957

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE PD
NAME CARROLL, WILLIAM "BILL"
STREET ADDRESS 2505 N.E. INDIAN RIVER DR., LOT 417
CITY-ST-ZIP JENSEN BEACH FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME OCONNER, DANIEL
STREET ADDRESS 2505 NE INDIAN RIVER DRIVE
CITY-ST-ZIP JENSEN BCH FL 34957

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME NORTON, CHRIS
STREET ADDRESS 2505 NE INDIAN RIVER DRIVE LOT 131
CITY-ST-ZIP JENSEN BEACH FL 34957

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME JOHNSON, MARION
STREET ADDRESS 2505 NE INDIAN RIVER DR
CITY-ST-ZIP JENSEN BEACH FL 34957

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

Phillip Baker
2505 N.E. Indian River Dr Lot 323
Jensen Beach FL 34957

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE REQUIRED

Marion Johnson 3-18-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

FILED
Mar 21, 2000 8:00 am
Secretary of State
03-21-2000 90092 011 ****61.25



DO NOT WRITE IN THIS SPACE