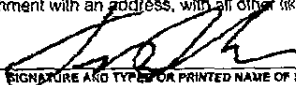


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 28, 2006 08:00 AM
Secretary of State

| | | |
|--|-------------------------|---|
| DOCUMENT # N03000000443 | |  |
| 1. Entity Name RIVERS EDGE STREET MAINTENANCE, INC. | | |
| Principal Place of Business C/O WALLACE B. MCCALL, ESQ 1001 N US HWY 1 STE 604 JUPITER, FL 33477 | | Mailing Address C/O WALLACE B. MCCALL, ESQ 1001 N US HWY 1 STE 604 JUPITER, FL 33477 |
| DO NOT WRITE IN THIS SPACE | | |
| | |  03032006 No Chg-NP CR2E037 (11/05) |
| 4. FEI Number 56-2333808 | | 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 | | |
| MCCALL, WALLACE B 1001 N US HWY 1 STE 604 JUPITER, FL 33477 | | 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 _____ (NOTE: Registered Agent signature required when remaining) <small>Signature, typed or printed name of registered agent and title if applicable</small> DATE | | |
| Filing Fee is \$61.25 Due by May 1, 2006 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
| | | 000000483001 04/11/06-80097-020 61.25 |
| 10. OFFICERS AND DIRECTORS | | |
| TITLE | D | |
| NAME | BROOKS, FRANKLIN | |
| STREET ADDRESS | 7689 SW RIVERS EDGE STE | |
| CITY-ST-ZIP | JUPITER, FL 33458 | |
| TITLE | D | |
| NAME | O'KEEFE, DENNIS T | |
| STREET ADDRESS | 7967 SE RIVERS EDGE STE | |
| CITY-ST-ZIP | JUPITER, FL 33458 | |
| TITLE | D | |
| NAME | GYLAND, STEPHEN R | |
| STREET ADDRESS | 7815 SE RIVERS EDGE STE | |
| CITY-ST-ZIP | JUPITER, FL 33458 | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  FRANK BROOKS | | 3-27-06 5616894446 Date Daytime Phone |