

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N03768

1. Entity Name

RIVERSIDE PARK OWNER'S ASSOCIATION, INC.

*R*

**FILED**  
**Sep 18, 2000 8:00 am**  
**Secretary of State**

09-18-2000 90038 024 \*\*\*\*61.25

Principal Place of Business

2713 N. HARBOR CITY BLVD.  
SUITE-9  
MELBOURNE FL 32935  
US

Mailing Address

BOX 410009  
MELBOURNE FL 32941

2. Principal Place of Business

3. Mailing Address

PO Box 410009

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Melbourne FL

4. FEI Number

59-2569403

Applied For

Not Applicable

Zip

Country

Zip

Country

32935

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

GENONI, JOHN P

3410 N HARBOR CITY BLVD

SUITE-A

MELBOURNE FL 32935

Name

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

4760 N. US 1 Suite 201

City

Melbourne

FL

Zip Code

32935

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

*August 31, 2000*

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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 PD  
NAME GENONI, JOHN  
STREET ADDRESS 3410 N HARBOR CITY BLVD STE A  
CITY-ST-ZIP MELBOURNE FL 32935 ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 4760 N US 1 Suite 201  
CITY-ST-ZIP Melbourne FL 32935

TITLE D  
NAME GENONI, JOHN M  
STREET ADDRESS 3410 N HARBOR CITY BLVD STE A  
CITY-ST-ZIP MELBOURNE FL 32935 ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 4760 N US 1 Suite 201  
CITY-ST-ZIP Melbourne FL 32935

TITLE D  
NAME GENONI, CHARLES  
STREET ADDRESS 3410 N HARBOR CITY BLVD STE A  
CITY-ST-ZIP MELBOURNE FL 32935 ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 4760 N US 1 Suite 201  
CITY-ST-ZIP Melbourne FL 32935

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*John Genoni* 8/31/2000 321-285-7601  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (5/00)