2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N04000000721 1. Entity Name RIVERVIEW PROMENADE CONDOMINIUM ASSOCIATION, INC.



04-29-2005 90299 040 ****61.25

Apr 29, 2005 8:00 am Secretary of State

FILED

Principal Place of Business C/O PANTHER MANAGEMENT CORP. Mailing Address C/O PANTHER MANAGEMENT CORP.

155 S MIAMI AVE PH-11 A MIAMI, FL 33130			155 S MIAMI AVE PH-11 A MIAMI, FL 33130				 					
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				04202005	Chg-NP	CR2E037 (10/03)		
City & State			City & State				4. FEI Numb	ว๊- <i>ลา</i> 41	——— 043		plied For Applicable	
Zip	Country			p Cou		ntry		5. Certificate of Status Desired Sa.75 Additional Fee Required				
6. Name and Address of Current Registered Agent							7. Name and Address of New Registered Agent					
REGISTERED AGENTS OF FLORIDA, LLC. 100 SE SECOND ST STE 2900 MIAMI, FL 33131-2130						Street Address (P.O. Box Number is Not Acceptable) 155 South Mani Avenue PHDA						
						City W	7.000		FI I	Zin Code	2	
8. The above named antity submitted 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 Signature Signature agent and title if applicable. (NOTE: Registered Agent alignature required when reinstating) DATE												
	_	e is \$61.25 Nay 1, 2005		 Election Campaign Find Trust Fund Contribution 			\$5.00 May f Added to Fees		vlake check pa rida Departme			
10.	OFFICERS AND DIRECTO			S 11			ADDITIONS/CF	ANGES TO OFFICE	ERS AND DIREC	TORS IN	10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD SIRLIN, D 155 S MI MIAMI, FI	AMI AVE PH 11-A		☐ Delete		· I] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1404 MAI	, DOUGLAS W RSH LANDING PKWY NVILLE BCH, FL 3220		☑ Delete	4	- 1] Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete		· I] Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	1					Change	Addition	

12. I hereby certify that the information symplex 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 admiss, with all other like empowered.

SIGNATURE: