

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010462

FILED
Jan 10, 2006
Secretary of State

Entity Name: LA RIVA RESORT ASSOCIATION, INC.

Current Principal Place of Business:

510 EAST ZARAGOZA STREET
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

6806 SEYBOLD ROAD
MADISON, WI 53719

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, G. THOMAS
510 EAST ZARAGOZA STREET
PENSACOLA, FL 32502 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SCHUTZ, DAVID A
Address: 6806 SEYBOLD ROAD
City-St-Zip: MADISON, WI 53719

Title: DVST () Delete
Name: BRYAN, WILLIAM C
Address: BOX 2006
City-St-Zip: KNOXVILLE, TN 37901

Title: D () Delete
Name: SCHUTZ, DAVID A JR.
Address: 2605 CTH F HIGHWAY
City-St-Zip: BARNEVELD, WI 53507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID A SCHUTZ

MGM

01/10/2006

Electronic Signature of Signing Officer or Director

Date