

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006141

FILED
Apr 25, 2007
Secretary of State

Entity Name: REY RIVERA MEMORIAL FUND, INC.

Current Principal Place of Business:

3335 ALTON ROAD
MIAMI BEACH, FL 33140

New Principal Place of Business:

601 LOCUST STREET
WINDSOR, CO 80550

Current Mailing Address:

3335 ALTON ROAD
MIAMI BEACH, FL 33140

New Mailing Address:

601 LOCUST STREET
WINDSOR, CO 80550

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERRI, MARCO
3335 ALTON ROAD
MIAMI BEACH, FL 33140 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Change (X) Addition
Name: RIVERA, ALLISON
Address: 601 LOCUST STREET
City-St-Zip: WINDSOR, CO 80550

Title: VD () Change (X) Addition
Name: RIVERA, ANGEL
Address: 601 LOCUST STREET
City-St-Zip: WINDSOR, CO 80550

Title: SD () Change (X) Addition
Name: DIAZ, ELENA
Address: 601 LOCUST STREET
City-St-Zip: WINDSOR, CO 80550

Title: TD () Change (X) Addition
Name: JONES, TOM
Address: 601 LOCUST STREET
City-St-Zip: WINDSOR, CO 80550

I hereby certify that the information supplied with this filing does not qualify 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: ALLISON RIVERA

PD

04/25/2007

Electronic Signature of Signing Officer or Director

Date