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NONPROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

RIVERS	SIDE PLAZA CONDOMINIUI	M ASSOCIATION, INC.		
Principal Plac	e of Business	Mailing Address		E INDIVINI ONI TIDIN TIDIN BITIN TIDON TITIN DIBIT DEBI DEBI DIBIT DIBIT PADI
C/O FLORIDA PROPERTY MANAGEMENT & SALES 1750 UNIVERSITY DR., STE. 114 CORAL SPRINGS FL 33071		C/O FLORIDA PROPERTY MANAGEMENT & SALES 1750 UNIVERSITY DR., STE, 114 CORAL SPRINGS FL 33071		3. Date Incorporated or Qualified 12/18/1985 4. FEI Number 65-0596575 Not Applied For
2. Principal P	lace of Business	26. Mailing Address	**************************************	5. Certificate of Status Desired \$8.75 Additional Fee Regulred
Suite, Apt.	₩, etc.	Suite, Apt. #, etc.	1. T. A. T. B. G. B. T. B. G. B. T. B.	Election Campaign Financing Trust Fund Contribution Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowners association? Yes X No
Zip	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
	9. Name and Address of Curre		1901	10. Name and Address of New Registered Agent
			81 Name	
SUITE 11	iiversity dr.		82 Street Add	dress (P.O. Box Number is Not Acceptable) FL 85 Zip Code
office or r agent. I a SIGNATURE	to the provisions of Sections 617.05 egistered agent, or both, in the Statum familiar with, and accept the oblig signature, typed or printed name of registered as	e of Florida. Such change was a gations of, Section 617.0503, Flo	authorized by the corpora orida Statutes.	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
	Digrations, types or printed harms of registated as	gent and tille il applicable. [NO1]	E: Registered Agent signature requ	
12.	OFFICERS AN	ND DIRECTORS	E: Registered Agent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	OFFICERS AN			
12. TITLE NAME	PD DYEN, STANLEY	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PD DYEN, STANLEY 8091 W. SAMPLE RD.	ND DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AN PD DYEN, STANLEY 8091 W. SAMPLE RD. CORAL SPRINGS FL 33065	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
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12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS	OFFICERS AN PD DYEN, STANLEY 8091 W. SAMPLE RD. CORAL SPRINGS FL 33065 VPD JEAN, MARIE 2926 NW 95 AVENUE	ND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
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Indicated on this annual report or 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 annual report or supplemental annual report is true and accorde 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 12 or Block 12 if changed, or on an attachment with an address. SIGNATURE:

954-752-4800

FILED

Apr 27 1998 8:00am

Secretary of State