2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

$\mathbf{FIL}\mathbf{ED}$ Apr 26, 2001 8:00 am Secretary of State DOCUMENT # N16212 1. Entity Name RIO VISTA CONDOMINIUM ASSOCIATION, INC. 04-26-2001 90148 044 ****61.25 Principal Place of Business Mailing Address 5610 N BANANA RIVER BLVD. 200 N FIRST ST. 10000 COCOA BEACH FL 32931 COCOA BEACH FL 32931 2. Principal Place of Business 3. Mailing Address 775 N. Atlantic Ave. Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2388445 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent "Sennifer Wagner Street Address (P.O. Box Number is Not Acceptable) RIGERMAN, MARILYN 200 NORTH FIRST STREET 5660 N. Banana River Blud. #2 COCOA BEACH FL 32931 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. FILE NOW: 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Trust Fund Contribution FEE IS \$61.25 Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE **Change** Addition CR2E037 (10/00 YOUNGMAN, LEW NAME STREET ADDRESS 5610-A N. BANANA RIVER BLVD. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP COCOA BEACH FL 32931 SD TITLE 😾 Delete TITLE ☐ Change Addition ALSHOUSE, CAROLYN NAME STREET ADDRESS 112 E VOLUSIA LANE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP COCOA BEACH FL 32931 **VPD** TITLE ☐ Delete Change Papanorea, Joseph ■ Addition NAME PAPANDREA, JOSEPH NAME STREET ADDRESS 9 HOUGHTON ROAD STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP **BELMONT MA 02478** TITLE ☐ Delete Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE 5aBatino, Anthony ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

Jenniter Wagner 4-10-01 321-784-7381