

**2001 UNIFORM BUSINESS REPORT (UBR)**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 AUG -7 AM 10:13

DOCUMENT # *N 95 00000 4254*  
1. Entity Name  
*RIVIERA ISLES HOMEOWNERS ASSOCIATION INC.*

Principal Place of Business Mailing Address  
*635 RIVIERA ISLE DRIVE (SAME)  
FORT LAUDERDALE  
FL, 33301*

**REINSTATEMENT** *00-01*  
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.  
3. Mailing Address Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
*ROBIN BRADLEY  
509 RIVIERA ISLE DRIVE  
FORT LAUDERDALE  
FL, 33301*

7. Name and Address of New Registered Agent  
Name *BARBARA MCGUIRE*  
Street Address (P.O. Box Number is Not Acceptable)  
*635 RIVIERA ISLE DRIVE*  
City *FORT LAUDERDALE* FL Zip Code *33301*

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.  
SIGNATURE *BARBARA MCGUIRE SECRETARY* *Barbara Mc* DATE *7/28/01*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
After MAY 1, 2001, Fee will be \$350.00  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>PRESIDENT DON METCALFE 346 RIVIERA ISLE DRIVE FORT LAUDERDALE, FL, 33301</i>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VICE PRESIDENT JEFF DAVIS 350 RIVIERA ISLE DRIVE FORT LAUDERDALE, FL, 33301</i>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>PRESIDENT (D) RON MCGUIRE 635 RIVIERA ISLE DRIVE FORT LAUDERDALE, FL, 33301</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VICE PRESIDENT (D) SETH JOSEPH 609 RIVIERA ISLE DRIVE FORT LAUDERDALE, FL, 33301</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>TREASURER (D) ROBIN BRADLEY 509 RIVIERA ISLE DRIVE FORT LAUDERDALE, FL, 33301</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>SECRETARY (D) BARBARA MCGUIRE 635 RIVIERA ISLE DRIVE FORT LAUDERDALE, FL, 33301</i>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *BARBARA MCGUIRE SECRETARY* *Barbara Mc* DATE *7/28/01* 954-768-0675  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)