

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90517 044 ****61.25

DOCUMENT # N96000000322

1. Entity Name
RIVERVIEW AT GRAND HARBOR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**100 VISTA ROYALE BLVD
VERO BEACH FL 32962
US**

Mailing Address

**100 VISTA ROYALE BLVD
VERO BEACH FL 32962
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0681023**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ROMANO, ALAN P
100 VISTA ROYALE BLVD
VERO BEACH FL 32962**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Alan P. Romano **Alan P. Romano**

3.17.03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	<input type="checkbox"/> Delete
NAME	TULLOCH, V C	
STREET ADDRESS	4820 20TH AVE	
CITY-ST-ZIP	VERO BEACH FL 32967	
TITLE	DVT	<input type="checkbox"/> Delete
NAME	SMITH, NORMA D	
STREET ADDRESS	4820 20TH AVE	
CITY-ST-ZIP	VERO BEACH FL 32967	
TITLE	DS	<input type="checkbox"/> Delete
NAME	SULLIVAN, J	
STREET ADDRESS	4820 20TH AVE	
CITY-ST-ZIP	VERO BEACH FL 32967	
TITLE	M	<input type="checkbox"/> Delete
NAME	ROMANO, ALAN P	
STREET ADDRESS	100 VISTA ROYALE BLVD	
CITY-ST-ZIP	VERO BEACH FL 32962	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Tulloch, Virginia	
STREET ADDRESS	100 Vista Royale Blvd.	
CITY-ST-ZIP	Vero Beach, FL 32962	
TITLE	DVT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Smith, Norma	
STREET ADDRESS	100 Vista Royale Blvd.	
CITY-ST-ZIP	Vero Beach, FL 32962	
TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sullivan, Judith	
STREET ADDRESS	100 Vista Royale Blvd.	
CITY-ST-ZIP	Vero Beach, FL 32962	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Virginia C. Tulloch* **Virginia C. Tulloch** **3/13/03/772)562-5004**

CR2E037 (10/02)