


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 04, 2005 8:00 am**  
**Secretary of State**

03-04-2005 90071 009 \*\*\*\*61.25

<b>DOCUMENT # N96000000362</b>	
<b>1. Entity Name</b> RIVERVIEW OWNERS' ASSOCIATION, INC.	

<b>Principal Place of Business</b> 4034 CREEKMONT DR BLAIRSVILLE GA 30512	<b>Mailing Address</b> 4034 CREEKMONT DR BLAIRSVILLE GA 30512
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<b>2. Principal Place of Business</b>	<b>3. Mailing Address</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



1st MOORE CR2E037 (10/04)

<b>4. FEI Number</b> 59-3525832	<b>Applied For</b> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

<b>6. Name and Address of Current Registered Agent</b> WALLER, MARY 4034 CREEKMONT DR. 30512 BLAIRSVILLE, GA OR 234 WOODLAWN DR PANAMA CITY BEACH FL 32407	<b>7. Name and Address of New Registered Agent</b> Name <u>Blanche Webb</u> Street Address (P.O. Box Number is Not Acceptable) <u>602 Raintree CT</u> City <u>PANAMA CITY BEACH</u> FL Zip Code <u>32413</u>
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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 MARY WALLER Mary Waller DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2005</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to</b> <b>Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WEBB, BLANCHE <del>6501 GARDENWAY</del> PANAMA CITY BEACH FL <del>32409</del>	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARDY, GAIL <del>234 WOODLAWN DRIVE</del> <del>PANAMA CITY BEACH FL 32407</del>	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALLER, MARY <del>4820 BOND ROAD</del> <u>4034 Creekmont Dr</u> <del>BLAIRSVILLE GA 30512</del> <u>Blairsville, GA 30512</u>	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: Mary Waller MARY WALLER 3-1-2005 850-235-~~7139~~ 1237  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

# ATTACHMENT

Mary E. Waller  
4034 Creekmont Drive  
Blairsville, GA 30512

40025792

#N96000000362

Division of Corporations  
Annual Report Section  
P.O. Box 6850  
Tallahassee, FL 32314

To Whom It May Concern:

This is to inform you that Blanche Smith Webb is the President of Riverview Owners Association and her name and address will appear as the new registered agent. Her address is in Florida and she will be able to expedite any and all business matters for us within the State of Florida.

I hope that I have filled out the report correctly. I have stated her new address on the enclosed form and want to include it in this letter also. Please note the change of addresses for all the officers and directors of this association. The address at 234 Woodlawn Drive is no longer the principal place of business.

I am sending in the \$61.25 fee owed for this annual report. In the future Blanche Smith Webb will handle all correspondence from her new address.

Thank you,

Mary Waller

Blanche Smith Webb  
602 Poinsettia Ct  
Panama City Beach, FL 32413

Gail Hardy  
P.O. Box 1434  
Long Beach, MS 39560

Mary Waller  
4034 Creekmont Drive  
Blairsville, GA 30512