2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9800006296

1. Entity Name

RIVERSIDE CONDOMINIUM, INC.

FILED Mar 12, 2001 8:00 am Secretary of State 03-12-2001 90505 045 ****70.00

| ļ | | | | | | | |
|---|--|--|---------------------------------------|---|--|-----------------------|---|
| Principal Place of Business | | Mailing Address | | | | | |
| 3711 SE 10TH AVE CAPE CORAL FL 33904 | | 3711 SE 10TH AVE #201 CAPE CORAL FL 33904 | | 1 (881)) | ı dısı isləl ibili selil ésili bölil bi | | . (8)(3 6)21 (8 0 |
| 2. Principal P | Place of Business | 3. Mailing Address | | | | | |
| Cita And II als | | 3711 SE 10th Ave Suite, Apt. #, etc. | | | | | |
| Suite, Apt. #, etc. | | #104 | | | DO NOT WRITE IN TH | IIS SPACE | |
| City & State | | City & State | | 4. FEI Numbe | er 05 000 4440 | | Applied For |
| | | Cape Coral | , F1 | | 65-0884419 | | |
| Zip | Country | Zip | Country | 5. Certificate | of Status Desired XX | \$8.75 A Fee Requi | |
| | 6. Name and Address of Curren | 33904 | Lee | 7. Name and | Address of New Register | | |
| | | The state of the s | Name | | يهمدسين المستعادية | | |
| | | | Pau Street Addr | <u>11 w. Thie</u> ress (P.O. Box Numbe | 1e Jr | | |
| | NO, MARY 10TH AVE | | Su con Addi | 233 (1:0: Box (10)) | 1 - 1 <u>- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -</u> | | |
| 1 | PRAL FL 33904 | | 371 | 1 SE 10th | Ave, #104 | | i |
| 0/11/200 | | _ | City | | | Zip Co | |
| 9 The above | named entity submits this statement | for the fourth of chancing its | | e Coral | | 1339 | 04 |
| SIGNATURE | Bull W | me | E: Registered Agent signature r | | <u> </u> | 24/0 | <u></u> |
| | | | | | · | | |
| FILE NOW: FEE IS \$61.25 | | | | \$5.00 May Be Added to Fees | | | |
| 10. | OFFICERS AND D | IRECTORS | 11. | ADDITIONS/CH | ANGES TO OFFICERS AND | DIRECTORS | IN 10 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD COPPOLINO, MARY 3711 SE 10TH AVE #201 | ⊠ Delete | NAME STREET ADDRESS | 3711 SE 1 | Thiele Jr. Oth Ave #104 | | Add Add |
| TITLE | CAPE CORAL FL 33904 | □ Delete | TITLE | <u>Cape Cora</u> | 1, F1. 33904 | Change | ☐ Ad |
| NAME | ANDREWS; JOHN | L Delete | NAME | | | L criange | ١١٠٠ السا |
| STREET ADDRESS CITY-ST-ZIP | 3711 SE 10TH AVE #201 CAPE CORAL FL 33904 | | STREET ADDRESS CITY-ST-ZIP | | | | |
| TITLE | STD | ▼ Delete | TITLE | SD | | Change | ^ |
| NAME STREET ADDRESS CITY-ST-ZIP | LIGHT, MARGARET 3711 SE 10TH AVE #101 CAPE CORAL FL 33904 | | NAME STREET ADDRESS CITY-ST-ZIP | 3711 SE | ovina 10th Ave #2 ral, F1. 339 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 0.112 00102.12 00001 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | - ∏ Adı |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | Add |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | · · · · · · · · · · · · · · · · · · · | ☐ Change | Addi |
| <u> </u> | Lertify that the information supplied wi | th this filing does not qualify for | / | in Section 119.07(3)(| i), Florida Statutes. I further | certify that the | information |
| indicated | certify that the information supplied wi on this report or supplemental report poration or the receiver or trustee emp | is true and accurate and that n | ny signature shall have | the same legal effect | t as if made under oath; the | at I am an offic | er or direct |