

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000007530

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: RIVERFUND SUPPORTING ORGANIZATION, INC.

Current Principal Place of Business:

C/O RIVERFUND, INC.
11155 ROSELAND RD UNIT 16
SEBASTAIN, FL 32958

New Principal Place of Business:

Current Mailing Address:

C/O RIVERFUND, INC.
11155 ROSELAND RD UNIT 16
SEBASTAIN, FL 32958

New Mailing Address:

FEI Number: 59-3627365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORRIGAN, JOHN P
444 BRICKELL AVENUE
SUITE 300
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALONGI FRANK, FRANCINE
Address: 11155 ROSELAND ROAD, #16
City-St-Zip: SEBASTAIN, FL 32958

Title: D () Delete
Name: KANTOR, PHYLLIS
Address: 11195 ROSELAND ROAD #4
City-St-Zip: SEBASTAIN, FL 32958

Title: D () Delete
Name: SADOWSKI, BARBARA
Address: 555 NE 34TH STREET # 2710
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DAVID, HAESELER
Address: 11155 ROSELAND ROAD
City-St-Zip: SEBASTAIN, FL 32958

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SADAKA, BARBARA
Address: 555 NE 34TH STREET # 2710
City-St-Zip: MIAMI, FL 33137

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PHYLLIS KANTOR

PRES

05/01/2002

Electronic Signature of Signing Officer or Director

Date