

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000079674

FILED
Apr 11, 2002 8:00 AM
Secretary of State

Entity Name: RRRV OPERATIONS, INC.

Current Principal Place of Business:

3400 RIVER RANCH BLVD
RIVER RANCH, FL 33867

New Principal Place of Business:

Current Mailing Address:

3400 RIVER RANCH BLVD
P.O. BOX 30529
RIVER RANCH, FL 33867

New Mailing Address:

FEI Number: 59-3665694

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RHODES, THOMAS C MD
708 BOUGAINVILLEA DR.
P.O. BOX 7236
INDIAN LAKE ESTATES, FL 33855 US

Name and Address of New Registered Agent:

RHODES, THOMAS C MD
708 BOUGAINVILLEA DR.
P.O. BOX 7219
INDIAN LAKE ESTATES, FL 33855 US

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:

04/11/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: M () Delete
Name: RHODES, THOMAS C
Address: 3400 RIVER RANCH BLVD
City-St-Zip: RIVER RANCH, FL 33867

Title: P () Delete
Name: STEVENS, ELLIS L
Address: 218 HORSESHOE BEND
City-St-Zip: RIVER RANCH, FL 33867

Title: V () Delete
Name: FRANK, LARRY
Address: 330 BOBCAT LANE
City-St-Zip: RIVER RANCH, FL 33867

Title: S/T () Delete
Name: BOYLES, RAY
Address: 451 WATERWAY DR.
City-St-Zip: RIVER RANCH, FL 33867

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: BOYLES, RAY
Address: 451 WATERWAY DR.
City-St-Zip: RIVER RANCH, FL 33867

Title: V (X) Change () Addition
Name: ROBERT, SCHULTZ
Address: 362 BEAR TRAIL
City-St-Zip: RIVER RANCH, FL 33867

Title: S/T (X) Change () Addition
Name: WALKER, RICHARD
Address: 558 WATERWAY DR.
City-St-Zip: RIVER RANCH, FL 33867

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS C. RHODES

MD

04/11/2002

Electronic Signature of Signing Officer or Director

Date