2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000079674

Entity Name: RRRV OPERATIONS, INC.

FILED Feb 28, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
3400 RIVER	R RANCH BLVI NCH, FL 33867		New Fillic	ipai i lace oi busine		
Current Mailing Address:			New Mailing Address:			
3400 RIVER RANCH BLVD P.O. BOX 30529 RIVER RANCH, FL 33867			3200 RIVER RANCH BLVD UNIT# 30529 RIVER RANCH, FL 33867			
FEI Number:	59-3665694	FEI Number Applied For ()	FEI Number Not Appli	cable () Certific	cate of Status Desired (X	()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
708 BOUGA P.O. BOX 7	THOMAS C ME AINVILLEA DR. 219 KE ESTATES, F					
The above in the State		bmits this statement for the pu	rpose of changing it	s registered office or	registered agent, or l	ooth,
SIGNATUR	E:					
SIGNATUR		Signature of Registered Agen	t		Date	
	Electronic	Signature of Registered Agen	t		Date	
Election Cam	Electronic	Trust Fund Contribution ().		S/CHANGES TO OF	Date FICERS AND DIRECT	CTORS:
Election Cam	Electronic paign Financing	Trust Fund Contribution (). ORS: Pelete AS C CH BLVD				CTORS:
Election Cam OFFICERS Title: Name: Address:	Electronic paign Financing AND DIRECT M () E RHODES, THOM, 3400 RIVER RAN RIVER RANCH, F	Trust Fund Contribution (). ORS: Pelete AS C CH BLVD L 33867	ADDITION Title: Name: Address:	()Change	FICERS AND DIREC	CTORS:
Election Cam OFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	Electronic paign Financing AND DIRECT M () [RHODES, THOM 3400 RIVER RAN RIVER RANCH, F P () [BOYLES, RAY 451 WATERWAY RIVER RANCH, F	Trust Fund Contribution (). ORS: Delete AS C CH BLVD L 33867 Delete DR. L 33867	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	()Change ()Change	FICERS AND DIREC () Addition () Addition	CTORS:

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 M 02/28/2003