

FILED
Jul 30, 2003 8:00 am
Secretary of State

07-09-2003 90039 003 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # PO10000091237	
1. Entity Name River Bend Community Corporation	

DO NOT WRITE IN THIS SPACE

55052754

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 9200 Olmstead Dr.	3. Mailing Address 9200 Olmstead Dr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Lake Worth FL	City & State Lake Worth FL	4. FEI Number 65-1131485	Applied For Not Applicable
Zip 33467	Country	Zip 33467	Country
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name Lawrence B. Hawkins	
Street Address (P.O. Box Number is Not Acceptable) 9202 Olmstead Drive	
City Lake Worth	FL Zip Code 33467

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)	DATE
January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Larry K. Hawkins 1021 NW 60th Street Gainesville FL 32605	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Laurence B. Hawkins 9202 Olmstead Drive Lake Worth FL 33467	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/23/03

561-968-3238

Date

Daytime Phone

Attachment#
55052754
PO1000091237

River Bend Community Corporation
9202 Olmstead Drive
Lake Worth, FL 33467
561-968-3238 Phone
561-968-3687 Fax

River Bend Community Corporation

May 23, 2003

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: River Bend Community Corporation EIN Number 65-1131485

To Whom It May Concern:

Per a conversation with one of your representatives, we are notifying you that we did not receive our 2003 Uniform Business Reports to file prior to the May 1st deadline. We are also requesting that any additional fees be waived.

We were also instructed to obtain the forms online and to complete them and attach with this letter.

Please contact either Stacy Roherty or myself at 561-968-3238 if you should have any questions.

Respectfully,

Tina M. Hawkins

Cc. File