

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90231 007 ***150.00

DOCUMENT # P01000096297

1. Entity Name
RIVER BAY DEVELOPMENT CORPORATION



Principal Place of Business
**267 75TH AVE
ST PETE BCH FL 33706**

Mailing Address
**267 75TH AVE
ST PETE BCH FL 33706**

2. Principal Place of Business
597 Corey Avenue

3. Mailing Address
597 Corey Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
St. Pete Beach, FL

City & State
St. Pete Beach, FL

4. FEI Number **59-3751767**

Applied For

Not Applicable

Zip
33706

Country
USA

Zip
33706

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DOUGLASS, ROBERT A
267 75TH AVE
ST PETE BCH FL 33706**

Name

Street Address (P.O. Box Number is Not Acceptable)
597 Corey Avenue

City
St. Pete Beach,

FL

Zip Code
33706

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
NAME **DOUGLASS, ROBERT A**
STREET ADDRESS **267 75TH AVE**
CITY-ST-ZIP **ST PETE BCH FL 33706**

☒ Change ☐ Addition
NAME
STREET ADDRESS **597 Corey Avenue**
CITY-ST-ZIP **St. Pete Beach, FL 33706**

TITLE **STD** ☐ Delete
NAME **WADSWORTH, LON C**
STREET ADDRESS **267 75TH AVE**
CITY-ST-ZIP **ST PETE BCH FL 33706**

☒ Change ☐ Addition
NAME
STREET ADDRESS **597 Corey Avenue**
CITY-ST-ZIP **St. Pete Beach, FL 33706**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Delete
NAME
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CITY-ST-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Signature Required
Robert A. Douglass 3/14/03 727 367-5614

CR2E034 (10/02)