

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000007351

FILED  
Feb 24, 2003  
Secretary of State

Entity Name: M & W RIVER PLACE INC.

## Current Principal Place of Business:

1511 PALM AVE.  
FT. MYERS, FL 33916

## New Principal Place of Business:

C/O SSI ACCT+TAX SVC.INC.  
1500 COLONIAL BLVD SUITE 235  
FT. MYERS, FL 33907

## Current Mailing Address:

1511 PALM AVE.  
FT. MYERS, FL 33916

## New Mailing Address:

C/O SSI ACCT+TAX SVC.INC.  
1500 COLONIAL BLVD SUITE 235  
FT. MYERS, FL 33907

FEI Number: 80-0029192

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIDDLE, CHARLOTTE  
1511 PALM AVE.  
FT. MYERS, FL 33916

## Name and Address of New Registered Agent:

SSI ACCOUNTING AND TAX SERVICE INC.  
1500 COLONIAL BLVD SUITE 235  
FT. MYERS, FL 33907

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: WERNER SCHMITZ

02/24/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: RIDDLE, MYRON  
Address: 1511 PALM AVE.  
City-St-Zip: FT. MYERS, FL 33916

Title: D (X) Delete  
Name: ESSEX, MIKE  
Address: 1811 ACACIA AVE.  
City-St-Zip: LEHIGH, FL 339700171

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: FESTER, MARION  
Address: C/O SSI ACCT+TAX SVC, 1500 COLONIAL BLVD  
City-St-Zip: FT. MYERS, FL 33907

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

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: MARION FESTER

D

02/24/2003

Electronic Signature of Signing Officer or Director

Date