

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 31, 2006  
Secretary of State**

DOCUMENT# P02000082496

Entity Name: PUNTA RIVERSIDE, INC.

**Current Principal Place of Business:**

1100 FIFTH AVENUE SOUTH  
201  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

1100 FIFTH AVENUE SOUTH  
201  
NAPLES, FL 34102

**New Mailing Address:**

FEI Number: 05-0523507      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KRAUS & BALLENGER PA  
1072 GOODLETTE RD  
NAPLES, FL 34102 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: WANKLYN, JOHN A  
Address: 1100 FIFTH AVENUE S. #201  
City-St-Zip: NAPLES, FL 34102

Title: SD ( ) Delete  
Name: CONNOR, SYLVIA  
Address: 3531 BONITA BAY BLVD #300  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VPD ( ) Delete  
Name: TOM, FLOOD  
Address: 1100 FIFTH AVENUE SOUTH #201  
City-St-Zip: NAPLES, FL 34102

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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 Chapter 119, 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: JOHN A WANKLYN

P

07/31/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date