

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90248 019 ***150.00

DOCUMENT # P03000119839

1. Entity Name
RIVERVIEW PETS AND SUPPLY INCORPORATED



Principal Place of Business
**4165 9TH ST. S.W., STE. 103
VERO BEACH, FL 32968**

Mailing Address
**5708 WINTERGARDEN PKWY.
FT. PIERCE, FL 34951**

20050000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03112005

Chg-P

CR2E034 (10/03)

4. FEI Number

04-3777114

Applied For

Not Applicable

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

**HAYNES, PAUL R
5708 WINTERGARDEN PKWY.
FT. PIERCE, FL 34951**

Name

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

City

FL

Zip Code

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 *Paul Haynes*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-18-5

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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
NAME **P** HAYNES, JANE ☐ Delete
STREET ADDRESS **5708 WINTERGARDEN PKWY.**
CITY-ST-ZIP **FT. PIERCE, FL 34951**

TITLE
NAME **JANE HAYNES** ☒ Change ☐ Addition
STREET ADDRESS **5708 WINTERGARDEN PKWY.**
CITY-ST-ZIP **FT. PIERCE, FL 34951**

TITLE
NAME **V** HAYNES, PAUL K ☐ Delete
STREET ADDRESS **5708 WINTERGARDEN PKWY.**
CITY-ST-ZIP **FT. PIERCE, FL 34951**

TITLE
NAME **PAUL KEVIN HAYNES** ☒ Change ☐ Addition
STREET ADDRESS **5708 WINTERGARDEN PKWY.**
CITY-ST-ZIP **FT. PIERCE, FL 34951**

TITLE
NAME **ST** HAYNES, LOIS J ☐ Delete
STREET ADDRESS **5708 WINTERGARDEN PKWY.**
CITY-ST-ZIP **FT. PIERCE, FL 34951**

TITLE
NAME **ANGIE TINGEN** ☒ Change ☐ Addition
STREET ADDRESS **122 WILLOWOODS GARDENS**
CITY-ST-ZIP **FLETCHER, NC 28732**

TITLE
NAME **S** TURGEN, AUGIN ☐ Delete
STREET ADDRESS **122 WILLWOOD GARDENS**
CITY-ST-ZIP **FLETCHER, NC 28732**

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

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: *Jane Haynes*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-05
Date Daytime Phone #