2006 FOR PROFIT CORPORATION

Apr 26, 2006 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # P03000151211 04-26-2006 90231 002 ***150.00 1. Entity Name RIVER MEADOWS DEVELOPMENT CORPORATION, INC. Principal Place of Business Mailing Address 50016849 4501 FAIRLANE DRIVE **4501 FAIRLANE DRIVE** NORTH PORT, FL 34288 NORTH PORT, FL 34288 Mailing Address 2. Principal Place of Business 640 P.O BOY 640 SALISOTA Suite, Apt. #, etc. 04102006 CR2E034 (11/05) City & State City & State 4. FEI Number Applied For FL SALASD7A APPLIED FOR SALPSOTA Not Applicable Country U.S. SALASO TA Country U.S. SARAS OFG Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BRIVIK, MARK Street Address (P.O. Box Number is Not Acceptable) 4501 FAIRLANE DRIVE NORTH PORT, FL 34288 City 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Derete TITLE TITLE resident ☐ Change TQ Addition arren Harris NAME BRIVIK, MARK P.D.D. NAME P.O. BOX 640 STREET ADORESS STREET ADDRESS BOX GUR CITY-ST-ZIP SARASOTA, FL 342300640 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CATY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THILE ☐ Delete DDE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP IIILE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statules. I further certify that the information indicated on this report or supplemental report is true and occurate 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 the empowered.

NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: SIGNATURE AND TYPED OR PRINTED

FILED

Daytime Phone #

ATTACHMENT

ICARD, MERRILL, CULLIS, TIMM, FUREN & GINSBURG, P.A.

ATTORNEYS AND COUNSELORS

2033 MAIN STREET, SUITE 600

SARASOTA, FLORIDA 34237

TELEPHONE (941) 366-8100 FACSIMILE (941) 366-6384 www.icardmerrill.com

REPLY TO: P.O. BOX 4195 SARASOTA, FLORIDA 34230

ROBERT E. MESSICK messick@icardmerrill.com

500/6849 #P03000151211 April 25, 2006

VIA FEDERAL EXPRESS

Florida Department of State
Division of Corporations
2670 Executive Center Circle, Suite 100
Tallahassee, FL 32301

Re: River Meadows Development Corporation, Inc.

To Whom It May Concern:

Enclosed for filing please find a 2006 For Profit Corporation Annual Report regarding the above-referenced matter, together with a check in the amount of \$150.00 for the filing fee.

If you have any questions, please do not hesitate to contact us.

Best regards,

ICARD, MERRILL, CULLIS,

TIMM, FUREN & GINSBURG, P.A.

Talia R. Kohne

Assistant to Robert E. Messick, Esq.

/trk

Enclosures

F:\USERS\REM\BRIVIK\RIV-MEAD.INC\DEPT-STA.001