

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000164118

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Entity Name:** RIVERSIDE CAFE ON THE RIVER, INC.

**Current Principal Place of Business:**

69 RIVERSIDE DRIVE  
ST. MARKS, FL 32355

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 35  
ST. MARKS, FL 32355

**New Mailing Address:**

**FEI Number:** 56-2492068

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WEST, STANLEY M JR.  
69 RIVERSIDE DRIVE  
ST. MARKS, FL 32355 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:** STANLEY M WEST

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** WEST, STANLEY M JR.  
**Address:** POST OFFICE BOX 35  
**City-St-Zip:** ST. MARKS, FL 32355

**Title:** VP  
**Name:** MORGAN, MIKE  
**Address:** POB 35  
**City-St-Zip:** ST. MARKS, FL 32327

**Title:** TS  
**Name:** WEST, KARON  
**Address:** POB 35  
**City-St-Zip:** SAINT MARKS, FL 32355

I hereby 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 all other like empowered.

**SIGNATURE:** STANLEY M WEST

DP

03/30/2011

Electronic Signature of Signing Officer or Director

Date