

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P05000005847

1. Entity Name
RIVIERA BEACH REDEVELOPMENT PARTNERS, INC.



Principal Place of Business
630 MAPLEWOOD DRIVE
100
JUPITER, FL 33458

Mailing Address
630 MAPLEWOOD DRIVE
100
JUPITER, FL 33458

FILED
Apr 23, 2008 08:00 AM
Secretary of State



02252008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, WILLIAM E
125 OWL POINTE CIRCLE
JUPITER, FL 33458

**DO NOT WRITE
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

U000000914598
05/08/08-80063-005 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D
GRAZIOTTO, RAYMOND E
630 MAPLEWOOD DRIVE, #100
JUPITER, FL 33458

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SOLOMON, II, JOHN C
630 MAPLEWOOD DRIVE, #100
JUPITER, FL 33458

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CFO
TAYLOR, WILLIAM E
125 OWL POINTE CIRCLE
JUPITER, FL 33458

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: William E. Taylor William E. Taylor CFO 4-17-08 561-625-9443

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #