

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000119752

FILED
Apr 30, 2008
Secretary of State

Entity Name: RIVERWOOD ASSET MANAGEMENT, INC.

Current Principal Place of Business:

1200 RIVERPLACE BLVD., STE. 902
JACKSONVILLE, FL 32207

New Principal Place of Business:

501 RIVERSIDE AVE., SUITE 902
JACKSONVILLE, FL 32202

Current Mailing Address:

501 RIVERSIDE AVE, SUITE 902
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 20-3377379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, BETH
1200 RIVERPLACE BLVD., STE. 902
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

STARLING, STACY
501 RIVERSIDE AVE., SUITE 902
JACKSONVILLE, FL 32202 US

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: STACY STARLING

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HUDSON, ASHTON
Address: 1200 RIVERPLACE BLVD., STE. 902
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HUDSON, ASHTON
Address: 501 RIVERSIDE AVE., SUITE 902
City-St-Zip: JACKSONVILLE, FL 32202

I hereby certify that the information supplied with this filing does not qualify 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: ASHTON HUDSON

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date