FILE N[redacted] ILING FEE AFTER MAY 1 IS $225.00

F[redacted] COH[redacted]N
ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # P92000008722 (0)

1. Corporation Name
RIVER FOREST, INC.

Principal Place of Business	Mailing Address
~~6830 CENTRAL AVE~~ ~~SUITE D~~ ~~ST. PETERSBURG FL 33707~~	~~6830 CENTRAL AVE~~ ~~SUITE D~~ ~~ST. PETERSBURG FL 33707~~

000001840210
-05/28/96--01020--036
***200.00

2. Principal Place of Business 21 P.O. Box 47565	2a. Mailing Address 26 P.O. Box 47565
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 St. Petersburg, FL	City & State 28 St. Petersburg, FL
Zip 24 33743 Country 25 Pinellas	Zip 29 33743 Country 30 Pinellas

3. Date Incorporated or Qualified: 11/30/1992
3a. Date of Last Report: 04/14/1995
4. FEI Number: 59-3153626 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BALLOU, RAYMOND L ~~6830 CENTRAL AVE.~~ ~~SUITE D~~ ~~ST. PETERSBURG FL 33707~~	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 511 Sandy Hook Road 83 84 City Treasure Island FL 85 Zip Code 33706

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE R L Ballou President 4-8-96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE	511 SANDY HOOK RD. TREASURE ISLAND FL 33706	☒ Change ☐ Addition
NAME	BALLOU, RAYMOND L.		1.2 NAME		
STREET ADDRESS	~~6830 CENTRAL AVENUE, STE D~~		1.3 STREET ADDRESS	P.O. Box 47565	
CITY-ST-ZIP	~~ST. PETERSBURG FL~~		1.4 CITY-ST-ZIP	St. Petersburg, FL 33743	
TITLE	VP	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	BALLOU, MICHAEL		2.2 NAME		
STREET ADDRESS	~~6830 CENTRAL AVENUE, STE D~~		2.3 STREET ADDRESS	P.O. Box 47565	
CITY-ST-ZIP	~~ST. PETERSBURG FL~~		2.4 CITY-ST-ZIP	St. Petersburg, FL 33743 (N/A)	
TITLE	S	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	BALLOU, LANA Y.		3.2 NAME		
STREET ADDRESS	~~6830 CENTRAL AVENUE, STE D~~		3.3 STREET ADDRESS	P O Box 47565	
CITY-ST-ZIP	~~ST. PETERSBURG FL~~		3.4 CITY-ST-ZIP	St. Petersburg FL 33743 (N/A)	
TITLE	AS	☐ DELETE	4.1 TITLE	511 SANDY HOOK RD. TREASURE ISLAND FL 33706	☒ Change ☐ Addition
NAME	MCCLURE, MARGARET		4.2 NAME		
STREET ADDRESS	~~6930 CENTRAL AVENUE, STE D~~		4.3 STREET ADDRESS	P.O. Box 47565	
CITY-ST-ZIP	~~ST. PETERSBURG FL~~		4.4 CITY-ST-ZIP	St. Petersburg, FL 33743 (N/A)	
TITLE	T	☐ DELETE	5.1 TITLE	511 SANDY HOOK RD TREASURE ISLAND FL 33706	☒ Change ☐ Addition
NAME	BALLU, RAYMOND L.		5.2 NAME		
STREET ADDRESS	~~6830 CENTRAL AVENUE, STE D~~		5.3 STREET ADDRESS	P O Box 47565	
CITY-ST-ZIP	~~ST. PETERSBURG FL~~		5.4 CITY-ST-ZIP	St. Petersburg, FL 33743 (N/A)	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

5/1/96 CC

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: R L Ballou President R. L. BALLOU 4-8-96 (813) 363-8120
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR* Date Daytime Phone #