FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DiVISION OF CORPORATIONS

DOCUMENT # P93000026549

RIVERTOWN, INC.

Principal Place of Business

Mailing Address

1431 1ST STREET ORANGE CITY FL 32763

2. Principal Place of Business

21

P.O. BOX 741297 ORANGE CITY FL 32774

2a. Mailing Address

26

FILED Feb 02, 1999 8:00am Secretary of State

02-02-1999 90006 041 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
04/12/1993

Applied For

Not Applicable

4. FEI Number

59-3170262

Suite, Apt.	·					5. Certifcate of Status Desired		\$8.75 A		
22	* - * * * * * * * * * * * * * * * * * *	27							`	
City & Stat	ie	City & St	ate			6. Election Campaign Financin Trust Fund Contribution	g 🗆	\$5.00 Added to	, ,	
Zip	Country	Zip		Country		8. This corporation owes the ci	urrent vear In	tangible		
24	25	29	30			Personal Property Tax.	•		□No	
	9. Name and Address of Current	<u></u>		<u> </u>	·	10. Name and Address of Nev	v Registered	Agent		
					Name		·			
ERNEST, MICHAEL W										
1431 1ST STREET				82	82 Street Address (P.O. Box Number is Not Acceptable)					
ORANGE CITY FL 32763					83					
OF THE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OF THE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OF				63						
				84	City			85 Zip C	ode	
and the second	-						<u>FL</u>	<u>. </u>		
,11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, F	lorida Statutes,	the above	e-named corpo	ration submits this statement for the	ne purpose of	changing its	registered	
office or i	registered agent, or both, in the State of	Fiorida, Such d ons of, Section 6	nange was auth 107.0505. Florida	iorized by a Statutes	tne corporation	ns board of directors, i nereby acc	eht rue abbo	munent as reç	istered	
J	The state of the s	2.,	,							
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable.	(NOTE: Re	gistered Ager	t signature required	when reinstating)	DATE			
12.	OFFICERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO C	FFICERS A	ND DIRECTO	RS IN 12	
TITLE	D		DELETE	1.1 TITLE	T T	the transfer		☐ Change	☐ Addition	
NAME	ERNEST, MICHAEL W			1.2 NAME		· · · · · · · · · · · · · · · · · · ·			ì	
STREET ADORESS	1431 1ST STREET				ADDRESS					
	ORANGE CITY FL 32763									
CITY-ST-ZIP	ORANGE CITT TE 32760		DELETE	1.4 CiTY-S 2.1 TITLE	1-ZIP			Change	☐ Addition	
TITLE		L				•				
NAME				2.2 NAME					ļ	
STREET ADORESS				2.3 STREE	ADDRESS .					
CiTY-ST-ZIP				2. 4 CITY-5	T-ZIP					
TITLE CONTRACT	THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRE	[]] DELETE	3.1 TMLE				Change	☐ Addition	
NAME	Part of the Control o			3.2 NAME						
STREET ADDRESS				3.3 STREET	ADDRESS			4.1		
CITY-ST-ZIP				3.4. CITY-S	T-ZIP				1	
TITLE			DELETE	4.1 TITLE		•	,	Change	Addition	
NAME	· ·			4. 2 NAME						
STREET ADDRESS		-		4.3 STREET	ADDRESS					
CITY-ST-ZIP		•		4.4 CITY-\$	1					
TITLE		Г	DELETE	5.1 TITLE				["] Change	Addition	
				5.2 NAME					_ ' ' '	
NAME				5.3 STREET	ADORESS					
STREET ADDRESS	l o									
CITY-ST-ZIP		-	7 DELETE	5.4 CITY-S' 6.1 TITLE	1-217			Change	- Addition	
TITLE		L] DELETE	_				☐ Change	☐ Addition	
NAME				6.2 NAME						
STREET ADDRESS	· · · ·			6.3 STREET	ADDRESS					
	I			* * * * * * * *					- /	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE

NATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TEL W. ERNEST

1-13-99 (90

Daytime Phone #

CR2E034 (11/98)