

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000038833

FILED
Feb 21, 2004
Secretary of State

Entity Name: RIVERWALK OF THE PALM BEACHES DEVELOPMENT COMPANY, INC.

Current Principal Place of Business:

4500 PGA BLVD.
SUITE 400
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

100 BLOOMFIELD HILLS PKWY.
SUITE 300
BLOOMFIELD HILLS, MI 48304

New Mailing Address:

FEI Number: 65-0496407 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHANNON, WILLIAM E
Address: 4500 PGA BLVD SUITE 400
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: DVCF () Delete
Name: SMITH, HARMON D
Address: 4500 PGA BLVD SUITE 400
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: DCFO () Delete
Name: KOON, DAVID A
Address: 4500 PGA BOULEVARD, STE. 400
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VPS () Delete
Name: STOLLER, JOHN R
Address: 100 BLOOMFIELD HILLS PKWY, STE. 300
City-St-Zip: BLOOMFIELD HILLS, MI 48304

Title: VPT () Delete
Name: ROBINSON, BRUCE E
Address: 100 BLOOMFIELD HILLS PKWY, STE. 300
City-St-Zip: BLOOMFIELD HILLS, MI 48304 US

Title: AS () Delete
Name: GAWTHROP, NANCY H
Address: 100 BLOOMFIELD HILLS PKWY, STE. 300
City-St-Zip: BLOOMFIELD HILLS, MI 48304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS (X) Change () Addition
Name: KLYM, JAN M
Address: 100 BLOOMFIELD HILLS PKWY, STE. 300
City-St-Zip: BLOOMFIELD HILLS, MI 48304

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAN M. KLYM

AS

02/21/2004

Electronic Signature of Signing Officer or Director

_____ Date