Certified Mail # 7004 1350 0003 8030 5119

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000001046

1. Entity Name

RIVER CLUB PROPERTIES, INC.



Principal Place of Business

9155 58TH DR. E.

SUITE A

BRADENTON, FL 34202

Mailing Address

9155 58TH DR. E.

SUITE A

BRADENTON, FL 34202

FILED May 05, 2005 8:00 am Secretary of State

05-05-2005 90107 013 ***150.00

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DO NOT WRITE IN THIS SPACE

04062005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0550165 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

D'URSO, LARRY J JR 9155 58TH DR. E. STE. A

BRADENTON, FL 34202

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					
Official of the Co. Number ratio on reflection adders and the in Abharana. (170) El reflection of desired address all and in an arrangement.					
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	 Election Campaign Financ Trust Fund Contribution. 	ing 🔲	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LECKEY, PHILLIP D 9115 58TH DR E. STE., A BRADENTON, FL 34202				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP SANDERS, LINDA K. 9115 58TH DR E. STE., A BRADENTON, FL 34202				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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					

in the report of supplies with this filing does not quality for the exemption stated in Section 119.07(3)(1). 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 eath; 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15/05___

941-153-1851

Daytime Phone #