

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 01, 2005 8:00 am
Secretary of State

03-01-2005 90068 037 ***150.00

DOCUMENT # P95000014361

1. Entity Name

RIVERBANKS COLLECTION, INC.



Principal Place of Business

3205 MANATEE AVENUE W
BRADENTON FL 34205
US

Mailing Address

3205 MANATEE AVENUE W
BRADENTON FL 34205
US

2. Principal Place of Business

2806 42 ST. E.
Suite, Apt. #, etc.

3. Mailing Address

2806 42 ST. E.
Suite, Apt. #, etc.



1st MOORE

CR2E034 (10/04)

City & State

BRADENTON, FL

Zip
34208

Country

USA

City & State

BRADENTON, FL

Zip
34208

Country

USA

4. FEI Number

65-0555104

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GREEN, GLORIA J
2806 42ND ST. EAST
BRADENTON FL 34208

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME GREEN, GLORIA J
STREET ADDRESS 2806 42ND ST. EAST
CITY-ST-ZIP BRADENTON FL 34208 ☐ Delete

TITLE VS
NAME GREEN, KENNETH J
STREET ADDRESS 2806 42 ST E
CITY-ST-ZIP BRADENTON FL 34208 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 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 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:

Gloria Green

Gloria Green

2/23/05

(541)
746-2670

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #