SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P95000023092 (6) DOCUMENT #
1. Corporation Name RIVERHOUSE LANDINGS. INC. Principal Place of Business Mailing Address 948 U.S. 1 SOUTH 948 U.S. 1 SOUTH VERO BEACH FL 32962 VERO BEACH FL 32962 3. Date Incorporated or Qualified 3a. Date of Last Report 03/21/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 1200 Indian River Dr. 1200 Indian River Dr. 65-0566522 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Sebastian Sebastian, Trust Fund Contribution Added to Fees Fla 8. This corporation has liability for intangible tax under s. 199.032 32958 25 Indian Riv 29 Indian Riv Florida Statutes Yes No 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name PINSON, DON J JR Jim F. Hankins
Street Address (P.O. Box Number is Not Acceptable)
1200 Indian River Drive 948 U.S. 1 SOUTH 82 VERO BEACH FL 32962 83 84 City 7ip Code 32958 85 Sebastian 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. \_\_\_\_\_6-13-96 President SIGNATURE Boy stered Agent's gnature required when relestating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (36/8)12 13. TELETE TITLE 1.1 TITLE Change Addition D/Secy.-Treas. NAME PINSON, DON J JR 1.2 NAME Jay B. Hankins CR2E034 948 U.S. 1 SOUTH STREET ADDRESS 1.3 STREET ADORESS 1200 Indian River Drive Sebastian, Florida 32958 Change Addition VERO BEACH FL 32962 CITY-ST-ZIP 1 4 CITY - ST - ZIP DELETE TITLE 2.1 TUILE D/President HANKINS, JIM F 2.2 NAME NAME 1200 Indian River Drive 948 U.S. 1 SOUTH STREET ADDRESS 2 3 STREET ADDRESS Sebastian, Florida 32958 VERO BEACH FL 32962 CITY - ST - ZIP 2 4 CITY -ST-ZIP TITLE DELETE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE Change Addition 4.1 THLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS

CITY - ST - ZIP 6.4 CiTY - \$1 - 7IP 14. I do hereby certify that the information supplied with this filling 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 617, Florida Statutes, and fichanged, or on an attachment with an address that my name appears in Block 12 or Block 13

4 4 CITY - ST - ZIP

5 3 STREET ADDRESS

5.4 City - St - ZiP

51 THLE

5.2 NAME

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

ED NAME OF SIGNING OFFICER OR DIRECTOR

Director/President

6-13-96 (561) 589-4422

Change Addition

Change Addition