

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 APR 29 AM 8:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000044589 (5)

1. Corporation Name

RIVERGATE CORPORATION

Principal Place of Business

Mailing Address

3016 US HWY 301 NORTH
#400
TAMPA FL 33619
US

3016 US HWY 301 N.
#400
TAMPA FL 33619
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/24/1996

4. FEI Number

59-3380220

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 9260 Bay Plaza Blvd

Suite, Apt. #, etc.

22 #501

City & State

23 Tampa, FL

Zip

24 33619

Country

25 Hillsborough

2a. Mailing Address

26 9260 Bay Plaza Blvd

Suite, Apt. #, etc.

27 #501

City & State

28 Tampa, FL

Zip

29 33619

Country

30 Hillsborough

9. Name and Address of Current Registered Agent

ROSS, BRIAN M
100 SOUTH ASHLEY DRIVE #2200
TAMPA FL 33602

10. Name and Address of New Registered Agent

81 Name

Edgel C. Lester, Jr., Esquire

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

c/o Carlton Fields

83

One Harbour Place

84

City
Tampa

FL

85 Zip Code
33602

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.

SIGNATURE

Edgel C. Lester, Jr.

(NOTE: Registered Agent signature required when reinstating)

4/27/98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME LEWIS, JAMES W. JR.
STREET ADDRESS 4507 COUNTRY GATE COURT
CITY-ST-ZIP VALRICO FL

TITLE ☐ DELETE

D
NAME ROSS, BRIAN M
STREET ADDRESS 8324 WELLINGTON PARK CIRCLE
CITY-ST-ZIP TAMPA FL 33647

TITLE ☐ DELETE

D
NAME LEWIS, CHRISTOPHER
STREET ADDRESS 4809 CLARKSDOLE LANE
CITY-ST-ZIP BRADON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

D
1.2 NAME Beth C. Lewis
1.3 STREET ADDRESS 4507 Country Gate Court
1.4 CITY-ST-ZIP Valrico, FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

Beth C. Lewis (Beth C. Lewis) 4/23/98 813-681-8100

CR2E034 (10/97)