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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000047503

RIVER BEND PROPERTIES, INC.

FILED Jan 22, 1999 8:00am **Secretary of State**

01-22-1999 90067 019 ***150.00



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Principal Plac	e of Business	Mailing Address			- 1 10011001 110 18(18 01)13 00171 08411 00117 00171		#### II(I I 6 0)
2150 NE 48TH CT LIGHTHOUSE POINT FL 33064 2150 NE 48TH CT LIGHTHOUSE POINT FL 33064			ı		DO NOT WRITE IN THIS	SPACE	
	•				3. Date Incorporated or Qualifed 05/30/1996		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Ар	plied For
21		26			65-0826778	No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A Fee Re	
City & Stat	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip	Country	Zip	Country		8. This corporation owes the current year in	tangible	
24	25	29 30)		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
			81 Nar	ne			
	L, FRANCIS J JR	• -	82 Stre	not Addres	ss (P.O. Box Number is Not Acceptable)		-
	O'NE 48TH CT		Jan	set Addres	Sa (1.0. Box Humber is Not Acceptable)		11 tr. 5m
LIGH	ITHOUSE POINT FL 33064	•	83				
3			84 City	/	FL	85 Zip C	ode
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was autho	orized by the c	ned corpor orporation	ation submits this statement for the purpose of 's board of directors. I hereby accept the appo	changing its intment as req	registered gistered
SIGNATURE	Stgnature, typed or printed name of registered agent	and title if applicable (NOTE: Re-	gistered Agent signat	ura required w	vhen reinstating) . DATE		{
12.	OFFICERS AND		13.	are required w	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12
TITLE	P	☐ DELETE	1,1 TITLE		ADDITIONO/OTIANOZO TO OT TOZINO XI	Change	Addition
NAME	BELL, FRANCIS J JR		1.2 NAME		•	_ •	_ }
STREET ADDRESS	4324 N. OCEAN BLVD.		1.3 STREET ADDRE				
	LAUDERDALE BY THE SEA FL 3	10000	1.5 GIREEI ABBIN				1
CITY-ST-ZIP	VP	TECH DE L	4.4.0FD/, OT 7ID	-33			
TITLE	Į Vr.		1.4 CITY-ST-ZIP	-30		☐ Channe	Addition
NAME	DELL DUDIG C	DELETE	2.1 TITLE			☐ Change	☐ Addition
	BELL, DORIS C		2.1 TITLE 2.2 NAME			☐ Change	☐ Addition
STREET ADDRESS	2150 NE 48TH CT.		2.1 TITLE 2.2 NAME 2.3 STREET ADDRE			☐ Change	☐ Addition
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CITY-ST-ZIP	2150 NE 48TH CT. LIGHTHOUSE POINT FL 33064	□ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRE 2.4 CITY-ST-ZIP 3.1 TITLE	ESS			· .
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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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: