2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P97000057655**

RIVERVIEW COTTAGES, INC.

HILL, STEVEN A

55530 FRONT ST. ASTOR FL 32102

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

HILL, STEVEN A

56326 REDBOW RD

56326 REDBOW RD

ASTOR FL 32102

ASTOR FL 32102

HILL, LINDA

(See criteria on back)

ST

11.

TITLE

NAME

NAME

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STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Principal Place of Business Mailing Address 55530 FRONT ST. FRONT ST. FE 32102 ASTOR FL 32102-3229 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Country Zip Country Zip

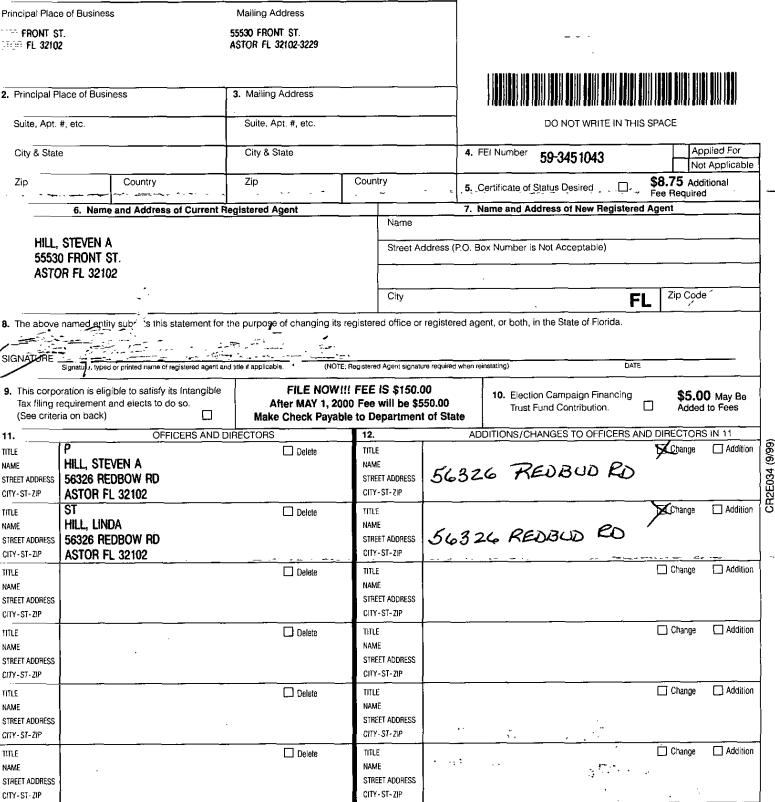
6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

FILED Jan 13, 2000 8:00 am Secretary of State

01-13-2000 90037 035 ***150.00



13. 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 11 or Block 12 if changed, or on an attachment with an admarks, with all other like empowered.

CITY-ST-ZIP

Name

City

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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SIGNATURE

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #