

2001 UNIFORM BUSINESS REPORT (U

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91239 024 ***150.00

DOCUMENT # **P97000066352 ✓**

1. Entity Name **RIVERTREE GROUP, INC.**

Principal Place of Business
 Nail This and Tan That
 261 E. Altamonte Dr
 Suite 1007
 Altamonte Springs, Fl 32701

Mailing Address

AC062627

2. Principal Place of Business
 same as above

3. Mailing Address
 same as above

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
 59-3472221

Zip

Country
 USA

Zip

Country
 USA

5. Certificate of Status Desired ☐ **\$8.75**
 Fee Rec

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Frederic Stanley
 Stanley, Dehlinger & Rascher
 260 Maitland Ave
 Suite 1500
 Altamonte Sprigs, Fl 32701

Name

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

City

FL

Zip

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when renewing)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☒ **XX**
 (See criteria on back)

FILE NOW! FEE IS \$150.00
After MAY 1, 2001, Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐ \$

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE ~~President~~ ☐ Delete
 NAME ~~Denise King~~
 STREET ADDRESS ~~523 Bristol Dr~~
 CITY-ST-ZIP ~~Altamonte Springs, Fl 32714~~

TITLE Denise King, president
 NAME
 STREET ADDRESS 523 Bristol Drive
 CITY-ST-ZIP Altamonte Springs, Fl 32714

TITLE ~~Vice-president~~ ☐ Delete
 NAME ~~Dolores Shope~~
 STREET ADDRESS ~~1786 Alaqua Dr~~
 CITY-ST-ZIP ~~Longwood, Fl 32779~~

TITLE Dolores Shope, vice-president
 NAME
 STREET ADDRESS 1786 Alaqua Drive
 CITY-ST-ZIP Longwood, Fl 32779

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
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 CITY-ST-ZIP ☐ Char

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 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Dolores L. Shope U.P. 4.25.01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOLORES L. SHOPE