

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

00 OCT 24 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000060842
1. Corporation Name
River Ridge Development Corporation

Principal Place of Business Mailing Address
8201 River Ridge Boulevard
New Port Richey, FL 34654

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
7/9/98

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 59-3560367	Applied For Not Applicable
21 Suits, Apt. #, etc.	26 Suits, Apt. #, etc.	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
23 Zip Country	28 Zip Country	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No	
24 Zip Country	29 Zip Country		

9. Name and Address of Current Registered Agent
Tankel, Robert P.A.
1299 Main Street, Suite F
Dunedin, FL 34698

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 _____ DATE _____
(Signature, typed or printed name of registered agent and fee if applicable) (NOTE: Registered Agent signature required when requesting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Boyce, M.D. 8201 River Ridge Boulevard New Port Richey, FL 34654 ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	President Boyce, M.D. 8201 River Ridge Boulevard New Port Richey, FL 34654 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Paul, William D. II 8201 River Ridge Boulevard New Port Richey, FL 34654 ☒ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	400003454634--7 -11/07/00--01032--004 *****63.25 *****63.25 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Vice president/Secretary Reynolds, B. J. 8201 River Ridge Boulevard New Port Richey, FL 34654 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Treasurer Williamson, Dona 8201 River Ridge Boulevard New Port Richey, FL 34654 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Director Nielsen, Helmar 8201 River Ridge Blvd. New Port Richey, FL 34654 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE: _____ 1-800-328-4700
M. D. Boyce, President

CR2E034 (1/198)